



Republic of the Philippines  
Department of Education  
Negros Island Region  
SCHOOLS DIVISION OF SAGAY CITY

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January 12, 2026

**DIVISION MEMORANDUM**

No. **032** \_\_\_\_, s. 2026

**SUBMISSION OF SWORN STATEMENT OF ASSETS, LIABILITIES AND NET WORTH FOR THE YEAR ENDING DECEMBER 31, 2025**

To: Asst. Schools Division Superintendent  
CID & SGOD Chiefs  
Education Program Supervisors  
Public Schools Districts Supervisors  
Public Elementary & Secondary School Heads  
Administrative Officer V  
Division Unit Heads  
All Concerned

1. In compliance with Rule VII, Section 1 of RA 6713 (Code of Conduct and Ethical Standards for Public Officials and Employees), the field is hereby instructed to submit the Sworn Statement of Assets, Liabilities and Net Worth (SALN) for the Year Ending December 31, 2025.
2. The notarized SALN shall be submitted at the Records Section in four copies on or before February 28, 2026.
3. In cases of joint filing executed by married personnel who are both working in DepEd Sagay City, each shall submit the said copy of the SALN to their respective schools/office.
4. Additionally, in cases of joint filing executed by married personnel working in different government agency, the following shall be observed:
  - a. If either spouse files Joint SALN with his/her mother agency other than DepEd, the spouse employed with DepEd shall submit a certified true copy of the duly filled SALN to his/her respective school/office for record purposes.
  - b. If the spouse employed with DepEd files the joint SALN, he/she shall submit four (4) duly notarized SALN to his/her respective school/office.
5. School Heads are advised to ensure 100% submission of SALN of their teachers and personnel and shall take into consideration items #3 and 4.
6. It is understood that in the conduct of this activity, there shall be no discrimination on account of age, school, gender, civil status, disability, religion, or other similar factors, or personal circumstances that run counter to the principles of equal opportunity.



**Address:** Sitio Chloe, Brgy. Rizal, Sagay City, Negros Occidental  
**Email Address:** [sagay.city001@deped.gov.ph](mailto:sagay.city001@deped.gov.ph)



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7. Immediate dissemination and compliance to this Memorandum is desired.

**DANNIE CLARK M. UGUL, CESE**  
Asst. Schools Division Superintendent  
Officer In-Charge  
Office of the Schools Division Superintendent



Enclosure : NONE  
Reference : NONE  
Allotment : N/A  
No. of Pages : 1

To be indicate in the **Perpetual Index** under the following subjects:

**POLICY**

**PERSONNEL**

FN: Rhea Baroba/Records/OSDS



**Address:** Sitio Chloe, Brgy. Rizal, Sagay City, Negros Occidental  
**Email Address:** [sagay.city001@deped.gov.ph](mailto:sagay.city001@deped.gov.ph)

## SWORN STATEMENT OF ASSETS, LIABILITIES, AND NET WORTH

(As required by R.A. No. 6713)

**COMPLIANCE FOR:**

Assumption of office as of \_\_\_\_\_  Annual filing as of December 31, \_\_\_\_\_  Exit as of \_\_\_\_\_

**DECLARANT:**

\_\_\_\_\_  
 (Family Name) (First Name) (M.I.)

**POSITION:**

\_\_\_\_\_  
**AGENCY/OFFICE:**

\_\_\_\_\_  
**OFFICE ADDRESS:**

**SPOUSE:**

\_\_\_\_\_  
 (Family Name) (First Name) (M.I.)

**POSITION:**

\_\_\_\_\_  
**AGENCY/OFFICE:<sup>1</sup>**

\_\_\_\_\_  
**OFFICE ADDRESS:**

**SPOUSES, WHO ARE BOTH PUBLIC OFFICIALS OR EMPLOYEES, MAY FILE THE SALN JOINTLY OR SEPARATELY.**

**THE DECLARANT SHALL CHECK THE APPROPRIATE BOX**

Joint Filing  Separate Filing  Not Applicable

**IF WITH MULTIPLE MARRIAGES, INDICATE NAME(S) OF SPOUSES, OTHERWISE CHECK THE "NOT APPLICABLE" BOX.**

Not Applicable

\_\_\_\_\_  
 \_\_\_\_\_

**UNMARRIED CHILDREN BELOW EIGHTEEN (18) YEARS OF AGE LIVING IN DECLARANT'S HOUSEHOLD**

NAME OF CHILD

AGE

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**ASSETS, LIABILITIES AND NETWORTH<sup>ii</sup>**

*(Including those of the spouse and unmarried children below eighteen (18) years of age living in declarant's household<sup>iii</sup>)*

**1. ASSETS**

**a. Real Properties**

DESCRIPTION <small>(e.g. lot, house and lot, condominium, and improvements)</small>	KIND <small>(e.g. residential, commercial, industrial, agricultural and mixed use)</small>	EXACT LOCATION	ASSESSED VALUE	CURRENT FAIR MARKET VALUE	ACQUISITION		ACQUISITION COST
			(As found in the Tax Declaration of Real Property, if available)	YEAR	MODE		

**Subtotal:** \_\_\_\_\_

**b. Personal Properties**

DESCRIPTION	ACQUISITION YEAR	ACQUISITION COST/ AMOUNT

**Subtotal:** \_\_\_\_\_

**TOTAL ASSETS:** \_\_\_\_\_

**2. LIABILITIES**

NATURE	NAME OF CREDITORS	OUTSTANDING BALANCE

**TOTAL LIABILITIES:** \_\_\_\_\_

**NET WORTH: Total Assets less Total Liabilities =** \_\_\_\_\_

**BUSINESS INTERESTS AND FINANCIAL CONNECTIONS**

*(of Declarant / Declarant’s spouse/ Unmarried Children Below Eighteen (18) years of Age Living in Declarant’s Household)*

*I/ We do not have any business interest or financial connection.*

NAME OF ENTITY/BUSINESS ENTERPRISE	BUSINESS ADDRESS	NATURE OF BUSINESS INTEREST &/OR FINANCIAL CONNECTION	DATE OF ACQUISITION OF INTEREST OR CONNECTION

**RELATIVES IN THE GOVERNMENT SERVICE**

*(Within the Fourth Degree of Consanguinity or Affinity. Include also Bilas, Balae and Inso<sup>iv</sup>)*

*I/ We do not know of any relative/s in the government service)*

NAME OF RELATIVE	RELATIONSHIP	POSITION	NAME OF AGENCY/OFFICE AND ADDRESS

I hereby certify that these are true and correct statements of my assets, liabilities, net worth, business interests and financial connections, including those of my spouse and unmarried children below eighteen (18) years of age living in my household, and that to the best of my knowledge, the above-enumerated are names of my relatives in the government within the fourth civil degree of consanguinity or affinity.

I hereby authorize the Ombudsman or his/her duly authorized representative to obtain and secure from all appropriate government agencies, including the Bureau of Internal Revenue such documents that may show my assets, liabilities, net worth, business interests and financial connections, to include those of my spouse and unmarried children below 18 years of age living with me in my household covering previous years to include the year I first assumed office in government.

Date: \_\_\_\_\_

\_\_\_\_\_  
*Signature of Declarant*

Government Issued ID: \_\_\_\_\_  
 ID No.: \_\_\_\_\_  
 Date Issued: \_\_\_\_\_

\_\_\_\_\_  
*Signature of Declarant*

Government Issued ID: \_\_\_\_\_  
 ID No.: \_\_\_\_\_  
 Date Issued: \_\_\_\_\_

**SUBSCRIBED AND SWORN** to before me this \_\_\_\_ day of \_\_\_\_\_, affiant exhibiting to me the above-stated government-issued identification card.

\_\_\_\_\_  
*(Person Administering Oath)*

<sup>i</sup> Position, Agency, and Address shall only be declared if the spouse is a public official or employee.  
<sup>ii</sup> Additional sheets may be used by the declarant, if necessary.  
<sup>iii</sup> Capital or paraphernal assets, and liabilities of the declarant’s spouse, and properties of children below 18 years of age and living in the declarant’s household shall be disclosed using the additional sheets provided.  
<sup>iv</sup> *Balae* refers to the parent of one’s son or daughter-in-law; *Bilas* refers to a brother-in-law’s wife or sister-in-law’s husband; *Inso* refers to the appellation for the wife of an elder brother or male cousin.

## SWORN STATEMENT OF ASSETS, LIABILITIES AND NET WORTH

As of \_\_\_\_\_  
 (Additional sheet/s for the declarant)

**NAME:** \_\_\_\_\_ **POSITION:** \_\_\_\_\_  
 (Family Name) (First Name) (M.I.) **AGENCY/OFFICE:** \_\_\_\_\_

### ASSETS, LIABILITIES AND NET WORTH

#### 1. ASSETS

##### a. Real Properties

DESCRIPTION <small>(e.g. lot, house and lot, condominium and improvements)</small>	KIND <small>(e.g. residential, commercial, industrial, agricultural and mixed use)</small>	EXACT LOCATION	ASSESSED VALUE	CURRENT FAIR MARKET VALUE	ACQUISITION		ACQUISITION COST
			<small>(As found in the Tax Declaration of Real Property)</small>		YEAR	MODE	

**Subtotal:** \_\_\_\_\_

##### b. Personal Properties

DESCRIPTION	ACQUISITION YEAR	ACQUISITION COST/ AMOUNT

**Subtotal:** \_\_\_\_\_

**TOTAL ASSETS:** \_\_\_\_\_

#### 2. LIABILITIES

NATURE	NAME OF CREDITORS	OUTSTANDING BALANCE

**TOTAL LIABILITIES:** \_\_\_\_\_

### BUSINESS INTERESTS AND FINANCIAL CONNECTIONS

NAME OF ENTITY/BUSINESS ENTERPRISE	BUSINESS ADDRESS	NATURE OF BUSINESS INTEREST &/OR FINANCIAL CONNECTION	DATE OF ACQUISITION OF INTEREST OR CONNECTION

## STATEMENT OF ASSETS, LIABILITIES AND NET WORTH

As of \_\_\_\_\_

*(Additional sheet/s for the exclusive properties of the declarant's spouse and unmarried children below eighteen (18) years of age living in declarant's household)*

**NAME:** \_\_\_\_\_ **POSITION:** \_\_\_\_\_  
 (Family Name) (First Name) (M.I.) **AGENCY/OFFICE:** \_\_\_\_\_

### ASSETS, LIABILITIES AND NET WORTH

#### 1. ASSETS

##### a. Real Properties

DESCRIPTION <small>(e.g. lot, house and lot, condominium and improvements)</small>	KIND <small>(e.g. residential, commercial, industrial, agricultural and mixed use)</small>	EXACT LOCATION	ASSESSED VALUE	CURRENT FAIR MARKET VALUE	ACQUISITION		ACQUISITION COST
			<small>(As found in the Tax Declaration of Real Property)</small>		YEAR	MODE	

##### b. Personal Properties

DESCRIPTION	ACQUISITION YEAR	ACQUISITION COST/ AMOUNT

#### 2. LIABILITIES

NATURE	NAME OF CREDITORS	OUTSTANDING BALANCE

### BUSINESS INTERESTS AND FINANCIAL CONNECTIONS

NAME OF ENTITY/BUSINESS ENTERPRISE	BUSINESS ADDRESS	NATURE OF BUSINESS INTEREST &/OR FINANCIAL CONNECTION	DATE OF ACQUISITION OF INTEREST OR CONNECTION