



Republic of the Philippines  
**Department of Education**  
REGION X – NORTHERN MINDANAO  
**SCHOOLS DIVISION OF OZAMIZ CITY**

January 6, 2025

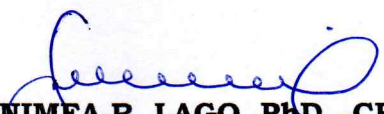
**DIVISIONAL MEMORANDUM**

No. 004, s. 2025

**ANNUAL SUBMISSION OF SWORN STATEMENT OF ASSETS, LIABILITIES AND NET WORTH (SALN) AND UPDATED PERSONAL DATA SHEET (PDS)**

TO : Assistant Schools Division Superintendent  
Chief Education Supervisors, CID and SGOD  
Public Elementary and Secondary School Heads  
Division Personnel  
This Division

1. Section 8, Statement and Disclosure of the Republic Act No. 6713 provides that “Public officials and employees have an obligation to accomplish and submit declarations under oath of, and the public has the right to know, their assets, liabilities, net worth and financial and business interests including those of their spouses and of unmarried children under eighteen (18) years of age living in their households.”
2. In view hereof, this Office requires all teaching and non-teaching personnel to submit the updated (as of December 31, 2024) three (3) original **Sworn Statement of Assets, Liabilities and Net Worth (SALN – revised 2015)** and one (1) original **Personal Data Sheet (PDS Revised 2017)**, duly signed by notary public, on or before January 24, 2025.
3. The SALN must be placed in 3 separate folders with attached **SALN Form 2** duly signed by the School Head.
4. Wide dissemination and immediate compliance of this Memorandum is desired.

  
**NIMFA R. LAGO, PhD., CESO VI**  
Assistant Schools Division Superintendent  
OIC – Office of the Schools Division Superintendent

Encl: As stated  
To be indicated in the Perpetual Index  
Under the following subjects:  
Policy Rules and Regulations  
SALN PDS

OSDS/DJBY



Address: IBJT Compound, Carangan, Ozamiz City  
Telephone No: (088) 545-09-88  
Telefax: (088) 545-09-90  
Email Address: ozamiz.city@deped.gov.ph





**ASSETS, LIABILITIES AND NETWORTH**

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

**FORM 2**  
**Attachment "C"**  
**(in triplicate)**

Pages No. \_\_\_\_\_

Address \_\_\_\_\_

**DISTRICT / SCHOOL:** \_\_\_\_\_

NAME ( in Alphabetical Order )			Present Position	TIN	Annual Income	Specific date when first assumed in the Office	No. of Years in the Gov't. Service	ASSETS	LIABILITIES	NET WORTH
Surname	First Name	MI								

Certified Correct:  
\_\_\_\_\_  
School Head

Noted:  
**NIMFA R. LAGO, CESO VI**  
\_\_\_\_\_  
Schools Division Superintendent