



OFFICE OF THE REGIONAL DIRECTOR

FIELD OFFICE - NCR

DSWD-GF-004 | REV 03 | 22 SEP 2023

DRN:NCR-FO-HRMDD-PAS-A-COMM-25-01-01210-S

MEMORANDUM

FOR

ALL OFFICIALS, PERMANENT, CONTRACTUAL AND

CASUAL EMPLOYEES

DSWD-NCR

FROM

THE REGIONAL DIRECTOR

DSWD-NCR

SUBJECT

SUBMISSION OF STATEMENT OF ASSETS, LIABILITIES

AND NETWORTH (SALN) FOR CY 2024

DATE

16 JANUARY 2025

This has reference to the submission of Statement of Assets, Liabilities and Net Worth (SALN) as stated in the Section 8 of the Republic Act No. 6713 (Code of Conduct and Ethical Standards for Public Officials and Employees) which requires the declarant 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."

Relative to this, with the full implementation of the web-based electronic filing system for Statement of Assets, Liabilities and Net Worth (e-SALN) of government officials and employees, please submit **four (4)** copies of duly completed SALN to Personnel Administration Section on or before **January 31, 2025** for onward submission of all original copies of the SALN along with the corresponding electronic/scanned copies to Office of the Ombudsman.

Please be informed that the copies of SALN should be printed **double-sided** in a **Legal Size** paper. Attached in this memorandum is a copy of SALN for your reference.

Given the forgoing, failure to submit the duly completed SALN within the prescribed timeline may constitute a violation of the office rules and regulations, and may result in appropriate Human Resource action.

You may also access the SALN format through the QR code found in this document.

For any inquiry and clarification, you may reach/coordinate with **Ms. Mary Grace M. Mahusay** of the Personnel Administration Section at telephone numbers (02) 8310-07-25 or (02) 8733-00-10 Loc. 211.

For your information and strict compliance.

MICHAEL JOSEPH J. LORICO

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SWORN STATEMENT OF ASSETS, LIABILITIES AND NET WORTH

As of <u>December 31, 2023</u>

(Required by R.A. 6713)

DECLARANT:	DELA CRUZ,	JUAN	M.	POSITION:	Administrative Aide IV
	(Family Name)	(First Name)	(M.I.)	AGENCY/OFFICE:	DSWD - NCR, Field Office
ADDRESS:	#1234	Brgy. Mabuhay		OFFICE ADDRESS:	389 San Rafael St., cor. Legard
,	Manila City				Manila
SPOUSE:	DELA CRUZ,	JUANA	S.	POSITION:	N/A
	(Family Name)	(First Name)	(M.I.)	AGENCY/OFFICE:	N/A
				OFFICE ADDRESS:	N/A
UNMARRII	ED CHILDREN B	ELOW EIGHTEEN ((18) YEAR	S OF AGE LIVING IN	DECLARANT'S HOUSEHO
UNMARRI	ED CHILDREN BI		[18] YEAR	S OF AGE LIVING IN	DECLARANT'S HOUSEHO
UNMARRI		ΙE	(18) YEAR		AGE
UNMARRI	NAN	Dela Cruz	(18) YEAR	DATE OF BIRTH	

1. ASSETS

a. Real Properties*

(e.g. lot, house and lot, condominium and improvements)	(e.g. residential, commercial, industrial, agricultural and mixed use)	EXACT	VALUE	CURRENT FAIR MARKET VALUE	ACÇ	UISITION	ACQUISITION	
			(As found in the Tax Declaration of Real Property)		YEAR	MODE	7	
N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	
N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	
N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	

years of age living in declarant's household)

Subtotal: N/A

b. Personal Properties*

DESCRIPTION	YEAR ACQUIRED	ACQUISITION COST/AMOUNT	
Cash in Bank	2024	55,000.0	
Furnitures and Fixtures	Various years	80,000.00	
Jewelries	Various years	40,000.00	
N/A	N/A	N/A	

Subtotal:	Php	175,	,000.	00
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TOTAL ASSETS (a+b):

Php 175,000.00

2. LIABILITIES*

, a T NATURE	NAME OF CREDITORS	OUTSTANDING BALANCE
GFAL II	GSIS	100,000.00
GSIS-MPL	GSIS	20,000.00
N/A	N/A	N/A
N/A	N/A	N/A
N/A	N/A	N/A

TOTAL LIABILITIES: 120,000.00

NET WORTH: Total Assets less Total Liabilities =

Php 55,000.00

BUSINESS INTERESTS AND FINANCIAL CONNECTIONS

(of 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
N/A	N/A	N/A	N/A
N/A	N/A	N/A	N/A
N/A	N/A	N/A	N/A

RELATIVES IN THE GOVERNMENT SERVICE

(Within the Fourth Degree of Consanguinity or Affinity. Include also Bilas, Balae and Inso)

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

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

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:Janua	ary 20, 2025		
	PLEASE SIGN		PLEASE SIGN Co-Declarant/Spouse)
Government Issued ID: ID No.: Date Issued:	DSWD – NCR 13-0000 January 03, 2023	Government Issued ID: ID No.: Date Issued:	TIN ID 123-456-789
SUBSCRIBED AN government issued idea	D SWORN to before me thin tification card.	isday of, affiant ex	
		(Person Administeri	ng Oath)