



OMBUDSMAN-CAGAYAN DE ORO
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APR 28 2023

IC No. _____ Time: _____
By: *[Signature]*

18 April 2023

THE DEPUTY OMBUDSMAN
Office of the Ombudsman
ALU Building, Kauswagan Hi-way
Cagayan de Oro City

Dear Sir/Madame:

We are submitting to your office copies of the Sworn Statement of Assets, Liabilities and Networth (SALN) of the employees of DSWD Field Office 10, Cagayan de Oro City for CY 2022.

Please acknowledge receipt hereof.

Very truly yours,

RAMEL F. JAMEN
Regional Director

MMB/HSP/ilrozn

APR 28 2023

IC No. _____ Time: _____
By: Made

DEPARTMENT OF SOCIAL WELFARE AND DEVELOPMENT
Field Office 10

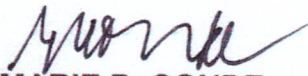
Summary List of Filers
Statement of Assets, Liabilities and Net Worth
Calendar Year 2022

CERTIFICATION

This is to certify that the SALNs submitted/included in the Summary List of Filers were reviewed and found compliant by the Review and Compliance Committee of this Office.

Further, the review was made in accordance with the review and compliance procedure in filing and submission of SALNs pursuant to CSC Memorandum Circular No. 10, series of 2006 (as amended by CSC Resolution No. 1300455 promulgated on March 4 2013).

Issued on April 18, 2023




ROSEMARIE P. CONDE
Assistant Regional Director for Administration
Chairperson



RONALD RYAN R. CUI

Assistant Regional Director for Operations
Member



MONAVIC M. BUDIONGAN
SWO IV/ HRMDD Chief
Member



APR 28 2023

IC No. _____ Time: _____
By: [Signature]

CERTIFICATION

This is to certify that the following officials / employees of this Office had **FAILED** to submit their Statement of Assets, Liabilities and Networth and Disclosure of Business Interest and Financial Connections for the year 2022 as required under Section 8 of Republic Act No. 6713 as implemented by Memorandum Circular issued by the Office of Ombudsman on June 21, 1995.

Name of Official / Employee (in Alphabetical Order)	Designation / Position	Remarks
NONE	NONE	NONE

This certification is being issued for whatever legal purpose it may serve.

DSWD-10, Cagayan de Oro City

[Signature]
MONAVIC M. BUDIONGAN
SWO IV/ HRMDD - Chief

SUBSCRIBED AND SWORN to before me this 18th day of April 2023 at Cagayan de Oro City, Philippines.

[Signature]
RAMEL F. JAMEN
Regional Director

MMB/HSP/llrc
[Signature]



X-FO-HRMDD-P-SALN-23-04-11468-S

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DEPARTMENT OF SOCIAL WELFARE AND DEVELOPMENT
Field Office 10

APR 28 2023

CERTIFICATION

IC No. _____ Time: _____
By: [Signature]

I, **MONAVIC M. BUDIONGAN**, hereby certify that the SALNs herewith submitted electronically are faithful reproductions of the original SALNs of the officials and employees of the Department of Social Welfare and Development Field Office 10, as listed in the attached summary of the Personnel Officer.

[Signature]
MONAVIC M. BUDIONGAN
SWO IV/HRMDD – Chief
April 18, 2023

SUBSCRIBED AND SWORN TO before me this 18th day of April 2023, affiant to exhibiting his/her competent evidence of identity, to wit:

[Signature]
RAMEL F. JAMEN
Regional Director

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