

CS Form No. 33-B
Revised 2018

Republic of the Philippines
Province of Batangas
MUNICIPALITY OF MATAASNAKAHOY

(Stamp of Date of Receipt)

Mr. JOEY G. LACSON

You are hereby appointed as Administrative Aide I (Utility Worker I) (SG-1)
(Position Title)
under Permanent status at the Office of the Municipal Accounting
(Permanent, Temporary, etc.) (Office/Department/Unit)
with a compensation rate of Ten Thousand One Hundred Forty Eight P 10,148.00
pesos per month.

The nature of this appointment is Original vice _____
(Original, Promotion, etc.)
MICHAEL L. LUBI, who Transferred with Plantilla Item No. 86
(Transferred, Retired, etc.)
Page 7.

This appointment shall take effect on the date of signing by the appointing officer/authority.

Very truly yours,

JANET MAGPANTAY ILAGAN
 Municipal Mayor

December 16, 2024
 Date of Signing

Subject to one (1) year
Probationary period

Accredited/Deregul 2200778 Jan 2022
 CSC Resolution No. 220, s. s.
 dated December 29, 2022

DRY SEAL

(Stamp of Date of Release)

Certification

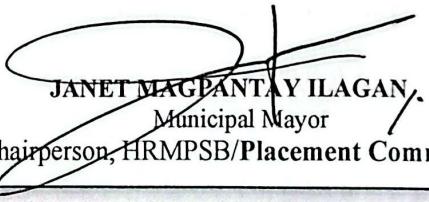
This is to certify that all requirements and supporting papers pursuant to CSC MC No. 24, s. 2017, as amended, have been complied with, reviewed and found to be in order.

The position was published at CSC Job Portal from November 12, 2024 to November 27, 2024 and posted in CSC-FO Batangas, Public Market, Office Lobby from November 12, 2024 to November 27, 2024 in consonance with RA No. 7041. The assessment by the Human Resource Merit Promotion and Selection Board (HRMPSB) started on November 28, 2024.


GALLY D. TIPAN
Mun. Human Res. Mgt. Officer

Certification

This is to certify that the appointee has been screened and found qualified by the majority of the HRMPSB/Placement Committee during the deliberation held on December 10, 2024.


JANET MAGPANTAY ILAGAN,
Municipal Mayor
Chairperson, HRMPSB/Placement Committee

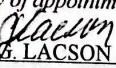
CSC/HRMO Notation

ACTION ON APPOINTMENTS			Recorded by
<input type="checkbox"/> Validated per RAI for the month of _____			
<input type="checkbox"/> Invalidated per CSCRO/FO letter dated _____			
<input type="checkbox"/> Appeal	DATE FILED	STATUS	
<input type="checkbox"/> CSCRO/ CSC-Commission			
<input type="checkbox"/> Petition for Review			
<input type="checkbox"/> CSC-Commission			
<input type="checkbox"/> Court of Appeals			
<input type="checkbox"/> Supreme Court			

Original Copy - for the Appointee
Original Copy - for the Civil Service Commission
Original Copy - for the Agency

Acknowledgement

Received original/photocopy of appointment on December 16, 2024


JOEY G. LACSON
Appointee

PERSONAL DATA SHEET

WARNING: Any misrepresentation made in the Personal Data Sheet and the Work Experience Sheet shall cause the filing of administrative/criminal case/s against the person concerned.

READ THE ATTACHED GUIDE TO FILLING OUT THE PERSONAL DATA SHEET (PDS) BEFORE ACCOMPLISHING THE PDS FORM.

Print legibly. Tick appropriate boxes (□) and use separate sheet if necessary. Indicate N/A if not applicable. DO NOT ABBREVIATE.

1. CS ID No.

(Do not fill up. For CSC use only)

I. PERSONAL INFORMATION

2. SURNAME	LACSON		
FIRST NAME	JOEY		
MIDDLE NAME	GONZALES		
3. DATE OF BIRTH (mm/dd/yyyy)	03/08/1984	16. CITIZENSHIP If holder of dual citizenship, please indicate the details	<input checked="" type="checkbox"/> Filipino <input type="checkbox"/> Dual Citizenship <input type="checkbox"/> by birth <input type="checkbox"/> by naturalization Pls. indicate country:
4. PLACE OF BIRTH	MATAASNAKAHOY		
5. SEX	<input checked="" type="checkbox"/> Male <input type="checkbox"/> Female		
6. CIVIL STATUS	<input checked="" type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Separated <input type="checkbox"/> Other/s:	17. RESIDENTIAL ADDRESS ZIP CODE	N/A House/Block/Lot No. N/A Subdivision/Village MATAASNAKAHOY City/Municipality 4223
7. HEIGHT (m)	1.65		N/A Street UPA Barangay
8. WEIGHT (kg)	62		N/A Province
9. BLOOD TYPE	O+		N/A House/Block/Lot No.
10. GSIS ID NO.	N/A		N/A Subdivision/Village MATAASNAKAHOY City/Municipality 4223
11. PAG-IBIG ID NO.	N/A	NANGKAAN Barangay BATANGAS Province	
12. PHILHEALTH NO.	09-200846244-7	N/A	
13. SSS NO.	04-2575645-0	19. TELEPHONE NO.	N/A
14. TIN NO.	707-494-231	20. MOBILE NO.	09396150670
15. AGENCY EMPLOYEE NO.	AGR # 013	21. E-MAIL ADDRESS (if any)	lacsonjoey8@gmail.com

II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME	N/A		23. NAME OF CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	N/A	NAME EXTENSION (JR., SR) N/A	ZHAUWIN YZZIEZ MADIO LACSON	07/09/2015
MIDDLE NAME	N/A		ZHACKEUV UZZEAH MADIO LACSON	09/08/2020
OCCUPATION	N/A		-NOTHING FOLLOWS-	
EMPLOYER/BUSINESS NAME	N/A			
BUSINESS ADDRESS	N/A			
TELEPHONE NO.	N/A			
24. FATHER'S SURNAME	LACSON			
FIRST NAME	PLACIDO	NAME EXTENSION (JR., SR) N/A		
MIDDLE NAME	CATOLINO			
25. MOTHER'S MAIDEN NAME				
SURNAME	GONZALES			
FIRST NAME	ADORACION			
MIDDLE NAME	DE VILLA		(Continue on separate sheet if necessary)	

III. EDUCATIONAL BACKGROUND

26. LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGREE/COURSE (Write in full)	PERIOD OF ATTENDANCE		HIGHEST LEVEL/ UNITS EARNED (if not graduated)	YEAR GRADUATED	SCHOLARSHIP/ ACADEMIC HONORS RECEIVED
			From	To			
ELEMENTARY	NANGKAAN ELEMENTARY SCHOOL	PRIMARY	1991	1998	GRADUATED	1998	N/A
SECONDARY	BAYORBOR NATIONAL HIGH SCHOOL	SECONDARY	1998	2000	SECOND YEAR	2002	N/A
VOCATIONAL / TRADE COURSE	N/A	N/A	N/A	N/A	N/A	N/A	N/A
COLLEGE	N/A	N/A	N/A	N/A	N/A	N/A	N/A
GRADUATE STUDIES	N/A	N/A	N/A	N/A	N/A	N/A	N/A

(Continue on separate sheet if necessary)

SIGNATURE

Jacson

DATE

November 26, 2024

IV. CIVIL SERVICE ELIGIBILITY

(Continue on separate sheet if necessary)

V. WORK EXPERIENCE

Include private employment. Start from your recent work. Description of duties should be indicated in the attached Work Experience sheet.

28.	INCLUSIVE DATES (mm/dd/yyyy)		POSITION TITLE (Write in full/Do not abbreviate)	DEPARTMENT / AGENCY / OFFICE / COMPANY (Write in full/Do not abbreviate)	MONTHLY SALARY	SALARY/ JOB/ PAY GRADE (if applicable)& STEP (Format "00-0") INCREMENT	STATUS OF APPOINTMENT	GOVT SERVICE (Y/N)
From	To							
01/04/2024	PRESENT		STREET SWEEPER/UTILITY AIDE	LGU MATAASNAKAHOY	7,000.00	N/A	JOB ORDER	N
11/13/2023	12/30/2023		STREET SWEEPER/UTILITY AIDE	LGU MATAASNAKAHOY	6,930.00	N/A	JOB ORDER	N
01/04/2023	06/30/2023		GARBAGE COLLECTOR/SORTER	LGU MATAASNAKAHOY	6,930.00	N/A	JOB ORDER	N
01/05/2022	06/30/2022		GARBAGE COLLECTOR/SORTER	LGU MATAASNAKAHOY	6,500.00	N/A	JOB ORDER	N
06/05/2021	12/31/2021		GARBAGE COLLECTOR/SORTER	LGU MATAASNAKAHOY	6,500.00	N/A	JOB ORDER	N
01/06/2021	06/30/2021		GARBAGE COLLECTOR/SORTER	LGU MATAASNAKAHOY	6,500.00	N/A	JOB ORDER	N
06/06/2020	12/30/2020		GARBAGE COLLECTOR/SORTER	LGU MATAASNAKAHOY	6,500.00	N/A	JOB ORDER	N
01/06/2020	06/30/2020		GARBAGE COLLECTOR/SORTER	LGU MATAASNAKAHOY	6,500.00	N/A	JOB ORDER	N
12/02/2019	12/30/2019		GARBAGE COLLECTOR/SORTER	LGU MATAASNAKAHOY	6,500.00	N/A	JOB ORDER	N
01/09/2019	06/30/2019		GARBAGE COLLECTOR/SORTER	LGU MATAASNAKAHOY	6,500.00	N/A	JOB ORDER	N
08/01/2018	12/30/2018		GARBAGE COLLECTOR/SORTER	LGU MATAASNAKAHOY	6,500.00	N/A	JOB ORDER	N
02/01/2018	04/16/2018		GARBAGE COLLECTOR/SORTER	LGU MATAASNAKAHOY	6,500.00	N/A	JOB ORDER	N
07/10/2017	12/30/2017		GARBAGE COLLECTOR/SORTER	LGU MATAASNAKAHOY	6,500.00	N/A	JOB ORDER	N
1/23/2017	6/30/2017		GARBAGE COLLECTOR/SORTER	LGU MATAASNAKAHOY	6,500.00	N/A	JOB ORDER	N
08/01/2016	12/31/2016		GARBAGE COLLECTOR/SORTER	LGU MATAASNAKAHOY	6,500.00	N/A	JOB ORDER	N
07/04/2016	7/25/2016		GARBAGE COLLECTOR/SORTER	LGU MATAASNAKAHOY	6,500.00	N/A	JOB ORDER	N
01/07/2016	6/30/2016		GARBAGE COLLECTOR/SORTER	LGU MATAASNAKAHOY	6,500.00	N/A	JOB ORDER	N
07/02/2015	12/31/2015		GARBAGE COLLECTOR/SORTER	LGU MATAASNAKAHOY	6,500.00	N/A	JOB ORDER	N
01/12/2015	6/30/2015		GARBAGE COLLECTOR/SORTER	LGU MATAASNAKAHOY	6,500.00	N/A	JOB ORDER	N
07/07/2014	12/31/2014		GARBAGE COLLECTOR/SORTER	LGU MATAASNAKAHOY	6,500.00	N/A	JOB ORDER	N
01/06/2014	6/30/2014		GARBAGE COLLECTOR/SORTER	LGU MATAASNAKAHOY	6,500.00	N/A	JOB ORDER	N
7/16/2013	8/20/2013		GARBAGE COLLECTOR/SORTER	LGU MATAASNAKAHOY	6,500.00	N/A	JOB ORDER	N
01/02/2013	6/30/2013		GARBAGE COLLECTOR/SORTER	LGU MATAASNAKAHOY	6500.00	N/A	JOB ORDER	N
07/02/2012	12/31/2012		GARBAGE COLLECTOR/SORTER	LGU MATAASNAKAHOY	6500.00	N/A	JOB ORDER	N
01/04/2012	6/30/2012		GARBAGE COLLECTOR/SORTER	LGU MATAASNAKAHOY	6500.00	N/A	JOB ORDER	N
07/02/2012	12/31/2012		GARBAGE COLLECTOR/SORTER	LGU MATAASNAKAHOY	6500.00	N/A	JOB ORDER	N
01/04/2012	6/30/2012		GARBAGE COLLECTOR/SORTER	LGU MATAASNAKAHOY	6500.00	N/A	JOB ORDER	N

(Continue on separate sheet if necessary)

SIGNATURE

Glaccon

DATE

November 26, 2024

<p>34. Are you related by consanguinity or affinity to the appointing or recommending authority, or to the chief of bureau or office or to the person who has immediate supervision over you in the Office, Bureau or Department where you will be appointed, a. within the third degree? b. within the fourth degree (for Local Government Unit - Career Employees)?</p>	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: N/A
<p>35. a. Have you ever been found guilty of any administrative offense? b. Have you been criminally charged before any court?</p>	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: N/A
<p>36. Have you ever been convicted of any crime or violation of any law, decree, ordinance or regulation by any court or tribunal?</p>	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: N/A
<p>37. Have you ever been separated from the service in any of the following modes: resignation, retirement, dropped from the rolls, dismissal, termination, end of term, finished contract or phased out (abolition) in the public or private sector?</p>	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: N/A
<p>38. a. Have you ever been a candidate in a national or local election held within the last year (except Barangay election)? b. Have you resigned from the government service during the three (3)-month period before the last election to promote/actively campaign for a national or local candidate?</p>	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: N/A <input type="checkbox"/> YES <input type="checkbox"/> NO If YES, give details: N/A
<p>39. Have you acquired the status of an immigrant or permanent resident of another country?</p>	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details (country): N/A
<p>40. Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Magna Carta for Disabled Persons (RA 7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972), please answer the following items:</p> <p>a. Are you a member of any indigenous group? b. Are you a person with disability? c. Are you a solo parent?</p>	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, please specify: N/A <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, please specify ID No.: N/A <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, please specify ID No.: N/A

41. REFERENCES (Person not related by consanguinity or affinity to applicant /appointee)

NAME	ADDRESS	TEL. NO.
Ms. Emilia R. Malaluan	Mataasnakahoy, Batangas	9175491663
Ms. Aileen Andal	Mataasnakahoy, Batangas	9171890486
Ms. Mary Claire Bagioen	Mataasnakahoy, Batangas	9060050076



42. I declare under oath that I have personally accomplished this Personal Data Sheet which is a true, correct and complete statement pursuant to the provisions of pertinent laws, rules and regulations of the Republic of the Philippines. I authorize the agency head/authorized representative to verify/validate the contents stated herein. I agree that any misrepresentation made in this document and its attachments shall cause the filing of administrative/criminal case/s against me.

Government Issued ID (i.e Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance	
Government Issued ID: TIN	
ID/License/Passport No.: 707-494-231	
Date/Place of Issuance: MARCH 24, 2023	

<i>Gally D. Tipan</i>	
Signature (Sign inside the box)	
November 26, 2024	
Date Accomplished	



SUBSCRIBED AND SWORN to before me this 26th day of Nov. 2024, affiant exhibiting his/her validly issued government ID as indicated above.

Gally D. Tipan

MHRMO

WORK EXPERIENCE SHEET

Instructions: 1. Include only the work experiences relevant to the position being applied to.
2. The duration should include start and finish dates, if known, month in abbreviated form, if known, and year in full. For the current position, use the word Present, e.g., 1998-Present. Work experience should be listed from most recent first.

- Duration: February 19, 2024 - Present
- Position: Job Order/Street Sweeper/Utility Aide
- Name of Office/Unit: General Services Office
- Immediate Supervisor: Emilia R. Malaluan
- Name of Agency/Organization and Location: Local Government Unit of Mataasnakahoy
- Summary of Actual Duties
 - Sweep and clean streets, sidewalks, and public areas to ensure cleanliness and safety.
 - Collect and properly dispose of litter, debris, and other waste materials.
 - Maintain and clean facilities, including restrooms, waiting areas, and office spaces.
 - Operate basic cleaning tools and equipment such as brooms, mops, and grass cutter.
 - Perform minor repairs and maintenance tasks within facilities, as needed.
 - Assist in setting up and arranging facilities for public events or functions.
 - Adhere to safety standards and guidelines while performing tasks.
 - Perform other related duties as assigned to support cleanliness and maintenance operations.
- Duration: March 28, 2007-June 30, 2022
- Position: Job Order/Garbage Collector/ Sorter
- Name of Office/Unit: General Services Office
- Immediate Supervisor: Aileen Andal
- Name of Agency/Organization and Location: Local Government Unit of Mataasnakahoy
- Summary of Actual Duties
 - Collect and segregate waste materials in designated areas.
 - Ensure proper disposal and sorting of biodegradable, non-biodegradable, and recyclable waste.
 - Maintain cleanliness and orderliness in waste collection zones.
 - Operate and maintain tools or equipment used for waste collection and sorting.
 - Assist in the transportation of collected garbage to disposal or recycling facilities.
 - Follow safety protocols and environmental regulations during waste handling.
 - Perform other related tasks as assigned to support waste management operations.


JOEY GONZALES LACSON
Date: November 26, 2024



Republic of the Philippines
Province of Batangas
MUNICIPALITY OF MATAASNAKAHOY



CERTIFICATION

TO WHOM IT MAY CONCERN:

This is to certify that in connection with the appointment of Mr. JOEY G. LACSON as Administrative Aide I (Utility Worker I) in the Office of the Municipal Accounting of this municipality, all pertinent requirements contained in RA 7160 in Section 325 on limitation of personal services in the total annual/supplemental appropriation, salary rate, etc., have been complied with.


JANET MAGPANTAY ILAGAN
Municipal Mayor



Republic of the Philippines
Province of Batangas
MUNICIPALITY OF MATAASNAKAHOY



OFFICE OF THE MUNICIPAL ACCOUNTANT

C E R T I F I C A T I O N

THIS IS TO CERTIFY that funds are available for the position of Administrative Aide I (Utility Worker I) in the Office of the Municipal Accounting of this municipality, with Salary Grade 1 amounting to ONE HUNDRED TWENTY ONE THOUSAND SEVEN HUNDRED SEVENTY SIX PESOS (P 121,776.00) per annum as per Annual Budget CY-2024 of this municipality.

Issued this 16th day of December , 2024 at Mataasnakahoy, Batangas.



LENILYN C. CARAAN
Municipal Accountant

Republic of the Philippines POSITION DESCRIPTION FORM DBM-CSC Form No. 1 <small>(Revised Version No. 1, s. 2018)</small>		1. POSITION TITLE (as approved by authorized agency) with parenthetical title Administrative Aide I (Utility Worker I)			
2. ITEM NUMBER		3. SALARY GRADE			
86		1			
4. FOR LOCAL GOVERNMENT POSITION, ENUMERATE GOVERNMENTAL UNIT AND CLASS					
<input type="checkbox"/> Province <input type="checkbox"/> City <input checked="" type="checkbox"/> Municipality		<input type="checkbox"/> 1st Class <input type="checkbox"/> 2nd Class <input type="checkbox"/> 3rd Class <input checked="" type="checkbox"/> 4th Class		<input type="checkbox"/> 5th Class <input type="checkbox"/> 6th Class <input type="checkbox"/> Special	
5. DEPARTMENT, CORPORATION OR AGENCY/ LOCAL GOVERNMENT		6. BUREAU OR OFFICE			
Local Government Unit of Mataasnakahoy, Batangas		Office of the Municipal Accountant			
7. DEPARTMENT / BRANCH / DIVISION		8. WORKSTATION / PLACE OF WORK			
Office of the Municipal Accountant		Office of the Municipal Accountant			
9. PRESENT APPROP ACT	10. PREVIOUS APPROP ACT	11. SALARY AUTHORIZED		12. OTHER COMPENSATION	
SB Resolution No. 182-S-2024/ Ordinance of Budget No. 25-S-2024		N/A		PERA ₱ 2,000.00 Clothing Allow. 6,000.00 Cash Gift 5,000.00 Year End Bonus 10,148.00 Mid-year Bonus 10,148.00 PEI 5,000.00	
13. POSITION TITLE OF IMMEDIATE SUPERVISOR		14. POSITION TITLE OF NEXT HIGHER SUPERVISOR			
Municipal Accountant		N/A			
15. POSITION TITLE, AND ITEM OF THOSE DIRECTLY SUPERVISED					
<i>(if more than seven (7) list only by their item numbers and titles)</i>					
POSITION TITLE		ITEM NUMBER			
N/A		N/A			
16. MACHINE, EQUIPMENT, TOOLS, ETC., USED REGULARLY IN PERFORMANCE OF WORK					
Broom, Dustpan, Telephone, Logbook					
17. CONTACTS / CLIENTS / STAKEHOLDERS					
17a. Internal	Occasional	Frequent	17b. External	Occasional	Frequent
Executive / Managerial	<input type="checkbox"/>	<input type="checkbox"/>	General Public	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Supervisors	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Other Agencies	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Non-Supervisors	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Others (Please Specify):		
Staff	<input type="checkbox"/>	<input type="checkbox"/>			
18. WORKING CONDITION					
Office Work	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Other/s (Please Specify)		
Field Work	<input type="checkbox"/>	<input type="checkbox"/>			
19. BRIEF DESCRIPTION OF THE GENERAL FUNCTION OF THE UNIT OR SECTION					
Keeps and control books of account and shall take charge of both the accounting and internal audit services of the municipality.					

20. BRIEF DESCRIPTION OF THE GENERAL FUNCTION OF THE POSITION (Job Summary)

Maintain cleanliness and orderliness of the workplace and does other related work.

21. QUALIFICATION STANDARDS

21a. Education	21b. Experience	21c. Training	21d. Eligibility
Must be able to read and write	None Required	None Required	None Required (MC 11, s. 96-Cat III)
21e. Core Competencies			Competency Level
None Yet			None Yet
21f. Leadership Competencies			Competency Level
None Yet			None Yet
22. STATEMENT OF DUTIES AND RESPONSIBILITIES (Technical Competencies)			Competency Level
<i>Percentage of Working Time</i>	<i>(State the duties and responsibilities here:)</i>		
20%	Maintain the cleanliness and orderliness of the office;		
20%	Assigned in all utility wor;		
15%	Assist in Filing of documents;		
20%	Record Incoming and Outgoing vouchers;		
10%	Transmit signed vouchers to treasurer;		
15%	Perform simple and routine engineering design task and other duties and functions that may be assigned from time to time.		

23. ACKNOWLEDGMENT AND ACCEPTANCE:

I have received a copy of this position description. It has been discussed with me and I have freely chosen to comply with the performance and behavior/conduct expectations contained herein.


JOEY G. LACSON 12/16/2024
 Employee's Name, Date and Signature


LENILYN C. CARAAN 12/16/2024
 Municipal Accountant, Date and Signature



Republic of the Philippines
Province of Batangas
Municipality of Mataasnakahoy



OATH OF OFFICE

I, Joey G. Lacson of Brgy. Nangkaan, Mataasnakahoy, Batangas having been appointed to the position of Administrative Aide I (Utility Worker I) hereby solemnly swear, that I will faithfully discharge to the best of my ability, the duties of my present position and of all others that I may hereafter hold under the Republic of the Philippines; that I will bear true faith and allegiance to the same; that I will obey the laws, legal orders, and decrees promulgated by the duly constituted authorities of the Republic of the Philippines; and that I impose this obligation upon myself voluntarily, without mental reservation or purpose of evasion.

SO HELP ME GOD.


JOEY G. LACSON

(Signature over Printed Name of the Appointee)

Government ID: TIN ID
ID Number : 707-494-231
Date Issued : March 24, 2023

Subscribed and sworn to before me this 16th day of December, 2024 in Mataasnakahoy Batangas, Philippines.


JANET MACPANTAY ILAGAN
Municipal Mayor



CS Form No. 4
Revised 2018

Republic of the Philippines
Province of Batangas
MUNICIPALITY OF MATAASNAKAHOY

CERTIFICATION OF ASSUMPTION TO DUTY

This is to certify that Mr. Joey G. Lacson has assumed the duties and responsibilities as Administrative Aide I (Utility Worker I) in the Office of the Municipal Accounting effective December 16, 2024.

This certification is issued in connection with the issuance of the appointment of Mr. Lacson as Administrative Aide I (Utility Worker I).

Done this 16th day of December 2024 in Mataasnakahoy, Batangas.

JANET MAGPANTAY ILAGAN
Municipal Mayor

Date: December 16, 2024

Attested by:

GALLY D. TIPAN

Mun. Human Res. Mgt. Officer

201 file
Admin
COA
CSC

SWORN STATEMENT OF ASSETS, LIABILITIES AND NET WORTH

As of DECEMBER 16, 2024

(Required by R.A. 6713)

Note: Husband and wife who are both public officials and employees may file the required statements jointly or separately.

Joint Filing *Separate Filing* *Not Applicable*

DECLARANT:	LACSON	JOEY	G.	POSITION:	Administrative Aide I (UTILITY WORKER I)
	(Family Name)	(First Name)	(M.I.)	AGENCY/OFFICE:	MDRRMO-LGU Mataasnakahoy
ADDRESS:	NANGKAAN, MATAASNAKAHOY, BATANGAS			OFFICE ADDRESS:	Brgy. IV, Mataasnakahoy, Batangas
SPOUSE:	N/A (Family Name)	N/A (First Name)	N/A (M.I.)	POSITION:	N/A
				AGENCY/OFFICE:	N/A
				OFFICE ADDRESS:	N/A

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

NAME	DATE OF BIRTH	AGE
ZHAUWN ULLYZZIEZ M. LACSON	JULY 09, 2015	9
ZHACKEUF UHZZEEAH M. LACSON	SEPTEMBER 02, 2020	4

ASSETS, LIABILITIES AND NETWORTH

(Including those of the spouse and unmarried children below eighteen (18) years of age living in declarant's household)

1. ASSETS

a. Real Properties*

b. Personal Properties*

* Additional sheet/s may be used, if necessary.

LIABILITIES*

NATURE	NAME OF CREDITORS	OUTSTANDING BALANCE
N/A	N/A	N/A
TOTAL LIABILITIES:		0.00
NET WORTH : Total Assets less Total Liabilities =		48,000.00

* Additional sheet/s may be used, if necessary.

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
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

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: DECEMBER 16, 2024

(Signature of Declarant)

N/A

(Signature of Co-Declarant/ Spouse)

Government Issued ID: UMID
ID No.: 0111-5763939-4
Date Issued: September 17, 2016

Government Issued ID: N/A
ID No.: N/A
Date Issued: N/A

SUBSCRIBED AND SWORN to before me this DEC 16, 2024 day of December, affiant exhibiting to me the above-stated government issued identification card.

ATTY. ROWELL B. MALABAG
 NOTARY PUBLIC UNTIL DECEMBER 13, 2024
 COMMISSION NO. 2022-09597 ROLL NO. 88570
 IBP NO. 38432/01-01-24/ PASIG CITY
 PTR NO. 33198603/01-02-24/ MATAHOY, BAT. S.
 MCLE COMPLIANCE NO. VII-0002112
 423 Rafael Lubis Street, Barangay II-A, Malabasnakahoy, Batangas

NATIONAL BUREAU OF INVESTIGATION NATIONAL BUREAU OF INVESTIGATION



Republic of the Philippines
Department of Justice
National Bureau of Investigation



40825362

This is to certify that the person whose name, picture, signature and thumbprint appearing below applied for NBI Clearance and the results is as follows:

NBI ID NO

L250CJHY48-RA1644948

FAMILY NAME
LACSON

MIDDLE NAME
GONZALES

ADDRESS
BARANGAY NANGKAAN MATAASNAKAHOY BATANGAS

DATE OF BIRTH
March 08, 1984

CITIZENSHIP

FILIPINO

PURPOSE

MULTI-PURPOSE CLEARANCE

REMARKS

NO DEROGATORY RECORD

VALID UNTIL

November 21, 2025

FIRST NAME

JOEY

HUSBAND'S SURNAME

PLACE OF BIRTH

MATAASNAKAHOY BATANGAS

CIVIL STATUS

SINGLE

GENDER

MALE

SIGNATURE



L250CJHY48-RA1644948

JUDGE JAIME B. SANTIAGO (RET.)
Director

Date Printed: Friday, November 29, 2024 09:01 AM

Agency	RA	DATID	Janet1
CASID	janet1	BIOID	janet1
O.R. No.	OKSFC6XS	RECID	mel
O.R. Date	11/21/2024 12:21:02 PM	INTID	
DST PAID		PRTID	gonzagatv



REPUBLIC OF THE PHILIPPINES
DEPARTMENT OF EDUCATION
REGION 1V A-CALABARZON



Form 137-A

Identification on _____
Principal

SECONDARY STUDENT'S
PERMANENT RECORD

Copy of this record sent to
Registrar of _____

Name: Lacson, Joey G. Date of Birth: Year 1984 Month: 03 Day: 08
 Place of Birth: Province Batangas Town: Mataasnakahoy Brgy: Nangkaan
 Parent or Guardian: Placido Lacson Occupation: Manggagawa
 Address of Parent or Guardian Nangkaan, Mataasnakahoy, Batangas
 Intermediate course completed(School) Elem. ng Nangkaan Year: 1998 Gen. Ave 77.00
 Total Number of years in school to complete elementary course : 6

CLASSIFIED AS		Total Number of years in school to date : <u>7</u>									
First Year	School:	Bayorbor National High School				School Year: <u>1998-1999</u>					
Curriculum		Grading Period				Final	Action	Credits			
Year	SUBJECT	1	2	3	4	Grade	Taken	Earned			
I	Filipino I					80	Passed	1			
I	Araling Panlipunan I					80	Passed	1			
I	PEHM I					75	Passed	1			
I	Edukasyong Paggapahalaga I					82	Passed	1			
I	English I					75	Passed	1			
I	Science and Technology I					77	Passed	2			
I	Mathematics I					76	Passed	1			
I	Technology & Home Economics I					76	Passed	2			
I	RHGP					84	Passed	0.2			
I	Computer Education I					76	Passed	0			
										Total	<u>10.2</u>

Promoted to Second Year Retained In _____ Gen. Average 77.53

Lacks Unit in _____ Has advanced unit in _____

	June	July	Aug	Sept.	Oct.	Nov.	Dec.	Jan.	Feb.	Mar.	Apr.	Total
Days of School												<u>206</u>
Days Present :												<u>206</u>

CLASSIFIED AS		Total Number of years in school to date <u>8</u>									
Second Year	School:	Bayorbor National High School				School Year: <u>1999-2000</u>					
Curriculum		Grading Period				Final	Action	Credits			
Year	SUBJECT	1	2	3	4	Grade	Taken	Earned			
II	Filipino II					73	Failed	0			
II	English II					73	Failed	0			
II	Mathematics II					73	Failed	0			
II	Science II					73	Failed	0			
II	Makabayan II					72	Failed	0			
II	Araling Panlipunan					72	Failed	0			
II	TEPP (THE)					73	Failed	0			
II	MSEPP (PEHM)					73	Failed	0			
II	EP (Incl RHGP)					73	Failed	0			
II	Computer Education II					73	Failed	0			
										Total	<u>0</u>

Promoted to _____ Retained In _____ Gen. Average: _____
 Lacks Unit in _____ Has advanced unit in _____

	June	July	Aug	Sept.	Oct.	Nov.	Dec.	Jan.	Feb.	Mar.	Apr.	Total
Days of School												<u>204</u>
Days Present												<u>184</u>

ADVISER'S SIGNATURE

ADVISER'S SIGNATURE

Lacson, Joey G.

Student's Name in Full

CLASSIFIED AS

Total Number of years in school to date

Curriculum Year	Subject	Grading Period				Final Grade	Action Taken	Credits Earned
		1	2	3	4			
III	Filipino III							
III	English III							
III	Mathematics III							
III	Science III							
III	Makabayan III							
III	Araling Panlipunan							
III	TEPP (THE)							
III	MSEPP (PEHM)							
III	EP (Incl RHGP)							
							Total	

Promoted to _____ Retained In _____ Gen. Average: _____

Lacks Unit in _____ Has advanced unit in _____

June	July	Aug	Sept.	Oct.	Nov.	Dec.	Jan.	Feb.	Mar.	Apr.	Total

Days of School _____ Days Present _____

Total Number of years in school to date _____

CLASSIFIED AS

School: _____ School Year: _____

Curriculum Year	Subject	Grading Period				Final Grade	Action Taken	Credits Earned
		1	2	3	4			
IV	Filipino IV							
IV	English IV							
IV	Mathematics IV							
IV	Science IV							
IV	Makabayan IV							
IV	Araling Panlipunan							
IV	TEPP (THE)							
IV	MSEPP (PEHM)							
IV	EP (Incl RHGP)							
IV	Computer Education IV						Total	

Promoted to _____ Retained In _____ Gen. Average: _____

Lacks Unit in _____ Has advanced unit in _____

June	July	Aug	Sept.	Oct.	Nov.	Dec.	Jan.	Feb.	Mar.	Apr.	Total

Days of School _____ Days Present _____

Graduation Date

I certify that this is a true record of Joey G. Lacson This student , on this 25th
day of November, 2024 Second Year
is eligible for admission to
student, and has no property responsibility in this school.


ROSLIE L. LIWANAG
Principal III

ADVISER'S SIGNATUR

ADVISER'S SIGNATUR

REPUBLIC OF THE PHILIPPINES
MUNICIPAL FORM NO. 182
(Revised 1983)

(To be accomplished in triplicate)

REPUBLIC OF THE PHILIPPINES
CERTIFICATE OF LIVE BIRTH
(Fill out completely, accurately and legibly in ink or typewriter)

PROVINCE BATANGASLOCAL CIVIL REGISTRY NO. 84-104CITY / MUNICIPALITY MATAASNAKAOY

1. NAME (First) <u>JOSIE</u> (Middle) <u>GONZALES</u> (Last) <u>LACION</u>	2. SEX (Place 'X' on appropriate answer) <input checked="" type="checkbox"/> Male <input type="checkbox"/> Female	3. DATE OF BIRTH (Day) <u>08</u> (Month) <u>03</u> (Year) <u>1984</u>
4. PLACE OF BIRTH (Name of Hospital/Institution: If not in hospital, give street/barangay) <u>BRGY. NANGKAAN, MATAASNAKAOY, BATANGAS</u>		(City/Municipality) <u>MATAASNAKAOY</u> (Province) <u>BATANGAS</u>

5a. TYPE OF BIRTH (Place 'X' on appropriate answer) <input checked="" type="checkbox"/> Single <input type="checkbox"/> Twin <input type="checkbox"/> Three or more	b. IF MULTIPLE BIRTH, CHILD WAS <u>1 First</u> <u>2 Second</u> <u>3 Third</u> <u>4th, etc.</u>	
6. MAIDEN (First) <u>ADORACION</u> (Middle) <u>de VILLA</u> (Last) <u>GONZALES</u>	7. NATIONALITY <u>Filipino</u>	8. RELIGION <u>R. Catholic</u>
9. NAME (First) <u>PLACIDO</u> (Middle) <u>CAROLINO</u> (Last) <u>LACION</u>	10. NATIONALITY <u>Filipino</u>	11. RELIGION <u>R. Catholic</u>

12. DATE AND PLACE OF MARRIAGE OF PARENTS (Important: If not applicable, fill Affidavit of Acknowledgment at the back)

June 2, 1976 - MATAASNAKAOY, BATANGAS

13. CERTIFICATE OF ATTENDANT AT BIRTH

I hereby certify that I attended the birth of the child who was born alive at 5:00 o'clock a.m./p.m. on the date stated above.

Signature _____

Address _____

Name in print _____

Date _____

Title or position _____

14. INFORMANT

Signature Placido facsonAddress BRGY. NANGKAANName in print PLACIDO A. LACION

MATAASNAKAOY, BATANGAS

Relationship to child FatherDate March 9, 1984

15a. PREPARED BY

b. RECEIVED AT THE OFFICE OF THE LOCAL CIVIL REGISTRAR

Signature Lourdes S. MapaSignature Lourdes S. MapaName in print LOURDES S. MAPAName in print LOURDES S. MAPATitle or position Municipal TreasurerTitle or position Municipal TreasurerDate March 9, 1984Date March 9, 1984

16a. INFORMATION GIVEN IN SUPPLEMENTAL REPORT

b. DATE WHEN INFORMATION WAS SUPPLIED

08110-54-105EPD-00320-BI001

BEST POSSIBLE IMAGE

T105081101050032003162022001
LP800971956BReN
01018-A84Q902-6Documentary
Stamp Tax PaidCLAIREDENNIS S. MAPA, Ph. D.
National Statistician and Civil Registrar General
Philippine Statistics Authority

MEDICAL CERTIFICATE
(For Employment)

INSTRUCTIONS

- a. This medical certificate should be accomplished by a licensed government physician.
- b. Attach this certificate to original appointment, transfer and reemployment.
- c. The results of the following pre-employment medical/physical/psychological must be attached to this form:

- Blood Test
 Urinalysis
 Chest X-Ray
 Drug Test
 Psychological Test
 Neuro-Psychiatric Examination (if applicable)



FOR THE PROPOSED APPOINTEE

NAME (Last Name, First Name, Name Extension (if any) and Middle Name)		AGENCY / ADDRESS	
LAGCON JOEY GONZALES		LGV MATANASNAKADY BATANGAS	
ADDRESS			
DR. JOEY NANGKAAN MATANASNAKADY BATS.			
AGE	SEX	CIVIL STATUS	PROPOSED POSITION
40 yrs	MALE	SINGLE	ADMINISTRATIVE AND UTILITY WORKER

FOR THE LICENSED GOVERNMENT PHYSICIAN

I hereby certify that I have reviewed and evaluated the attached examination results, personally examined the above named individual and found him/her to be physically and medically <input type="checkbox"/> FIT / <input type="checkbox"/> UNFIT for employment.			
SIGNATURE over PRINTED NAME OF LICENSED GOVERNMENT PH		OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE	
<i>Juanita Caran, MD</i>			
AGENCY/Affiliation of Licensed Government Physician: <i>MA</i>			
LICENSE NO.	HEIGHT (M) Bare Foot	WEIGHT (KG) Stripped	BLOOD TYPE
11447	5'5	65KG	O+
OFFICIAL DESIGNATION	DATE EXAMINED		
<i>Mto</i>	12/13/24		

MEDICAL CERTIFICATE
(For Employment)

INSTRUCTIONS

- a. This medical certificate should be accomplished by a licensed government physician.
- b. Attach this certificate to original appointment, transfer and reemployment.
- c. The results of the following pre-employment medical/physical/psychological must be attached to this form:

- Blood Test
 Urinalysis
 Chest X-Ray
 Drug Test
 Psychological Test
 Neuro-Psychiatric Examination (if applicable)



FOR THE PROPOSED APPOINTEE

NAME (Last Name, First Name, Name Extension (if any) and Middle Name)			AGENCY / ADDRESS
LACSON JOEY GONZALES			LGV - MATAASNAKADYO BATANGAS
ADDRESS			
BRGY. NANGKAAN MATAASNAKADYO BATANGAS			
AGE	SEX	CIVIL STATUS	PROPOSED POSITION
40%	MALE	SINGLE	ADMINISTRATIVE AIDE UTILITY WORKER I

FOR THE LICENSED GOVERNMENT PHYSICIAN

I hereby certify that I have reviewed and evaluated the attached examination results, personally examined the above named individual and found him/her to be physically and medically FIT / UNFIT for employment.

SIGNATURE over PRINTED NAME OF LICENSED GOVERNMENT PHYSICIAN	OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE		
<i>Juanita Caraan, RN</i>			
AGENCY/Affiliation of Licensed Government Physician:			
<i>MAR</i>			
LICENSE NO.	HEIGHT (M) Bare Foot	WEIGHT (KG) Stripped	BLOOD TYPE
113447	5'5	65kg	O+
OFFICIAL DESIGNATION	DATE EXAMINED		
<i>MAR</i>	12/13/24		



Republic of the Philippines
Province of Batangas
Municipality of Mataas na Kahoy
MUNICIPAL HEALTH OFFICE



NAME : JOEY LACSON

Requesting Physician : Dr. Karla M. Caraan

Age :

Sex : Male

Date : November 22, 2024

LABORATORY RESULT

HEMATOLOGY

		Normal Value			Normal Value
Hemoglobin	16.2	(M) 13.0 - 18.0 g/dl (F) 12.0 - 16.0 g/dl	WBC	6.3	5 - 10 x 10 ⁹ / L
RBC	5.12	(M) 4.0 - 5.5 x 10 ¹² / L (F) 4.0 - 4.5 x 10 ¹² / L	Segmenters	60	40.0 - 65.0
Hematocrit	0.44	(M) .40 - .48 vol % (F) .37 - .45 vol %	Lymphocyte	35	20.0 - 43.0
Platelet Count	261	150 - 400 x 10 ⁹ / L	Eosinophil		01.0 - 05.0
MCV		80.0 - 100 fL	Monocyte	5	03.0 - 08.0
MCH		28.0 - 32.0 pg	Stabs		01.0 - 05.0
MCHC		31.0 - 25.0 g/dL	Others:		

Note: Please forward your result directly to your requesting physician

Debbie M. Lescano

Medical Technologist

Republic of the Philippines Province of Batangas Provincial Health Office SAN JOSE DISTRICT HOSPITAL San Jose, Batangas (043) 741-5456/ 778-0921			
NAME: Joey Lacson		SEX: M	AGE: 40
PHYSICIAN:		WARD: OPD	O.R. NO. 35943425
RESULTS		NORMAL VALUE	
Color:	Yellow	Yellow to amber	CASTS:
Transparency:	Clear	Clear	
Reaction(pH):	6.0	1.8 - 7.8	
Sp. Gravity:	1.010	1.015 to 1.025	
Sugar:	Negative	Negative	
Protein:	Negative	Negative	
MICROSCOPIC:			OTHERS:
Pus cell (WBC)	0-2 / hpf	0 - 2 / hpt	PREGNANCY TEST:
Red blood cell	0-1	0 - 1 / hpf	
Epithelial cell	-	Few present	
Bacteria	few	Few present	URINE BILE:
A. Urates	few		
Mucus Threads			
MAY V. MACALINDONG, RMT, ASCPi LIC NO. 0055416 MEDICAL TECHNOLOGIST		 AZEUS O. SILVA, MD, FPSP/LIC NO. 0094522 PATHOLOGIST	



MATAAS NA KAHOY COMMUNITY HOSPITAL

#49 Rafael Lubis St., Mataasnakahoy, Batangas

Tel. No. (043) 702-1588 / 0908-556-4522

NAME: LACSON, JOEY	CASE NO.: 24-2401
AGE: 40 SEX: MALE	DATE: NOV.22,2024
Attending Physician:	
Chief complaint: CLEARANCE	
Procedure: CXR PA	

RADIOLOGIC REPORT

VISUALIZED LUNG FIELDS ARE CLEAR

HEART IS NOT ENLARGED

OTHER CHEST STRUCTURES ARE UNREMARKABLE

IMPRESSION:

NORMAL CHEST FINDINGS

JOHN MARK B. DIO, RRT
Radiologic Technologist

VILLAMOR L. TANGONAN JR, M.D, FPCR, FUSP
Radiologist



MLT Psychological Evaluation Center

PNP Accreditation No. - 2000 - 0014
Main Office: 316 Quezon Avenue, Quezon City
Telephone No. 929-7261 / 410-6639

TO:

SUBJECT: PSYCHOLOGICAL EXAMINATION

NAME: JOEY G. LACSON

DATE OF EXAM: 23 Nov. 2024

AGE: 40

CIVIL STATUS: Single

HOME ADDRESS: Nangkaan, Mataasnakahoy, Batangas

EVALUATION REPORT

FACTORS	FINDINGS
Intelligence (Ability to learn & solve problems)	AVERAGE
Educational Attainment	HS GRADUATE
Experience (relevance to position)	J/O UTILITY AIDE
Motivation: Financial Security	AVERAGE
Change in Assignment	NONE
Honesty/Integrity	AVERAGE
Social Adjustment	AVERAGE
Loyalty (Identifying with superiors)	AVERAGE
Hostility & Violent Tendencies	No trace of violence
Acceptance of Responsibility	AVERAGE
Energy and Initiative	AVERAGE
Independence (self-reliance)	AVERAGE
Self-Discipline	AVERAGE
Steadiness and Endurance Under Pressure .	AVERAGE

SUMMARY

Intelligence Quotient: 96

Classification: AVERAGE

Percentage Score: 36th PERCENTILE

Personality Evaluation: Subject seeks stability and good provision for his children's educational supplement. Subject has regrets over unattained goals and wasted opportunities, thus making the most out of every chance that come his way at present.

REMARKS: Recommended

MA. CORAZON J. PAMINTUAN
Psychologist
(Accreditation No. 130)

Valid for (6) months from date of issue.