



REPUBLIC OF THE PHILIPPINES
KAGAWARAN NG PANANALAPI
KAWANIHAN NG INGATANG-YAMAN
(BUREAU OF THE TREASURY)

Attachment 1
Fidelity Bond Application Form
(Revision No. 02 Date: May 30, 2022)

RISK NUMBER

(to be accomplished by BTr Officer)

REQUEST FOR APPLICATION FOR BONDING AND/OR CANCELLATION OF
FIDELITY BOND OF ACCOUNTABLE PUBLIC OFFICER

INSTRUCTIONS:		1. ACCOMPLISH THIS FORM CORRECTLY		3. MARK APPROPRIATE BOXES <input type="checkbox"/> WITH CHECK <input checked="" type="checkbox"/> "✓"	
2. PRINT ENTRIES LEGIBLY IN CAPITAL LETTERS					
TYPE OF APPLICATION:	<input checked="" type="checkbox"/> NEW <input type="checkbox"/> RENEWAL <input type="checkbox"/> CANCELLATION, please proceed to Item Nos. 24-32	OLD RISK NUMBER:			
		For Renewal			
1. NAME		2. ADDRESS		PASSPORT SIZE ID PHOTO	
BAUTISTA ANGEL MAE BAUTISTA Surname Given Name Name Ext. (e.g., Jr.) Middle Name		249 PUROK TALDAWA, PALIGUI, APALIT PAMPANGA, PAMPANGA			
3. DATE OF BIRTH (mm/dd/yyyy) 01/20/2002		4. PLACE OF BIRTH JBL HOSPITAL, CITY OF SAN FERNANDO, PAMPANGA			
5. SEX <input type="checkbox"/> MALE <input checked="" type="checkbox"/> FEMALE		7. CIVIL STATUS <input checked="" type="checkbox"/> SINGLE <input type="checkbox"/> WIDOWED			
6. TIN 638525260		<input type="checkbox"/> MARRIED <input type="checkbox"/> SEPARATED		8. CONTACT NUMBER 9757054062	
10. MONTHLY INCOME (Salaries, allowances, business income and the like) 1,300.00		11. ESTIMATED MONTHLY EXPENSES 1,000.00		9. EMAIL ADDRESS cygel.bautista101@gmail.com	
12. 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? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If yes, give details: _____					
13. a. Have you ever been charged of any administrative and/or criminal offense? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If yes, give details: Case No/s: _____ Date Filed: _____ Status of Case/s: _____			b. Have you ever been found guilty of any administrative and/or criminal case before any administrative body, tribunal or court? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If yes, give details: Case No/s: _____ Date Filed: _____ Status of Case/s: _____		
14. CHARACTER REFERENCE (Individual must not be related up to the fourth degree by consanguinity or affinity to applicant)					
NAME		ADDRESS		CONTACT NUMBER	
HERMINIGILDO ALFONSO AQUINO		PALIGUI APALIT PAMPANGA		9695671457	
KENNETH BAUTISTA		PALIGUI APALIT PAMPANGA		9551779297	
EDILBERTO LINGAT DIZON JR.		PALIGUI APALIT PAMPANGA		9218869595	
15. I declare that the answer to the foregoing questions are true to the best of my knowledge and belief. I fully understand that any misrepresentation made in this application and supporting documents shall cause the filing of administrative/criminal case(s) against me. Government Issued ID : PHIC ID ID/License/Passport Number : 570536193284359 Date/Place of Issue : 10/16/2022 MUNICIPALITY OF ANGEL MAE BAUTISTA BAUTISTA / 04/07/2024 Signature over Printed Name /Date Accomplished					
16. SUBSCRIBED AND SWORN to before me this _____, affiant exhibiting his/her validly issued Government ID as indicated above. Doc. No. _____; Page No. _____; Book No. _____; Series of _____.					
Signature of Officer/Person Administering Oath					

17. AMOUNT OF ACCOUNTABILITY <table style="width: 100%; margin-top: 10px;"> <tr> <th style="width: 80%;"></th> <th style="width: 20%; text-align: center;">AMOUNT OF ACCOUNTABILITY</th> </tr> <tr> <td colspan="2">(a) Public Funds</td> </tr> <tr> <td>(1) As Collecting Officer</td> <td style="text-align: right;">P 0.00</td> </tr> <tr> <td>(2) As Disbursing Officer</td> <td style="text-align: right;">50,317.88</td> </tr> <tr> <td>(3) As Signing Officer</td> <td style="text-align: right;">0.00</td> </tr> <tr> <td>(4) Investment Officer (GS Investments, Time Deposits, etc.)</td> <td style="text-align: right;">0.00</td> </tr> <tr> <td colspan="2">(b) Public Property</td> </tr> <tr> <td>(1) Inventories (per GAAM)</td> <td style="text-align: right;">P 0.00</td> </tr> <tr> <td>(2) Property, Plant & Equipment (Net Book Value)</td> <td style="text-align: right;">0.00</td> </tr> <tr> <td colspan="2">(c) Forms and other valuables</td> </tr> <tr> <td>(1) Internal Revenue Stamps</td> <td style="text-align: right;">P 0.00</td> </tr> <tr> <td>(2) Postage and other Stamped Stock</td> <td style="text-align: right;">0.00</td> </tr> <tr> <td>(3) Official Receipt</td> <td style="text-align: right;">0.00</td> </tr> <tr> <td>(4) Others Forms and valuables</td> <td style="text-align: right;">0.00</td> </tr> <tr> <td>TOTAL AMOUNT</td> <td style="text-align: right;">P 50,317.88</td> </tr> </table>		AMOUNT OF ACCOUNTABILITY	(a) Public Funds		(1) As Collecting Officer	P 0.00	(2) As Disbursing Officer	50,317.88	(3) As Signing Officer	0.00	(4) Investment Officer (GS Investments, Time Deposits, etc.)	0.00	(b) Public Property		(1) Inventories (per GAAM)	P 0.00	(2) Property, Plant & Equipment (Net Book Value)	0.00	(c) Forms and other valuables		(1) Internal Revenue Stamps	P 0.00	(2) Postage and other Stamped Stock	0.00	(3) Official Receipt	0.00	(4) Others Forms and valuables	0.00	TOTAL AMOUNT	P 50,317.88	18. NAME OF OFFICE OR AGENCY PALIGUI, APALIT PAMPANGA, PAMPANGA (LGU-BRGY)
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TOTAL AMOUNT	P 50,317.88																														
19. ADDRESS OF OFFICE OR AGENCY APALIT PAMPANGA, PAMPANGA Municipality/City Province																															
20. STATION/DIVISION (Place of assignment) BARANGAY PALIGUI APALIT																															
21. TITLE OF POSITION OR DESIGNATION SANGGUNIANG KABATAAN (SK) TREASURER																															
22. DATE OF DESIGNATION OR ASSUMPTION OF ACCOUNTABILITY 2024 02 09 Year Month Day																															
23. BOND PERIOD COVERAGE <input checked="" type="checkbox"/> One (1) year <input type="checkbox"/> Two (2) years <input type="checkbox"/> Three (3) years																															
THIS BLOCK TO BE FILLED ONLY IN CASE OF BOND CANCELLATION																															
24. OFFICE OR AGENCY AND STATION																															
25. NAME OF OFFICERS TO BE RELIEVED Surname Given Name Middle Name	26. PRESENT POSITION OR DESIGNATION																														
27. AMOUNT OF BOND	28. RISK NUMBER AND EFFECTIVITY DATE																														
29. DATE OF RELIEF Year Month Day	30. CAUSE OF RELIEF																														
31. THIS IS TO CERTIFY THAT, as Head of Agency of PALIGUI, APALIT PAMPANGA, PAMPANGA (LGU-BRGY), I verified the truthfulness of the answers to the questions contained on the face of this form and found them correct insofar as can be ascertained and that the applicant is a safe and conservative risk. Hence, the undersigned is recommending approval and authorizing the request for <div style="margin-top: 10px;"> <input checked="" type="checkbox"/> Application for Bonding <input checked="" type="checkbox"/> New <input type="checkbox"/> Renewal <input type="checkbox"/> Cancellation of Bond </div> <div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div> of the above accountable public officer. </div> <div style="text-align: right;"> HERMINIGILDO A. AQUINO, 04/09/2024 AGENCY ADMIN Signature over Printed Name of Head of the Agency/Date Accomplished </div> </div>																															
THIS BLOCK TO BE FILLED BY BTr ONLY																															
32. AMOUNT OF BOND RECOMMENDED 45,000.00	33. AMOUNT OF BOND PREMIUM PAYABLE 675.00																														
This is to certify that I have carefully evaluated the request for of Fidelity Bond of the above-mentioned accountable public officer. <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div> Name & Signature of BTr Officer </div> <div> <div style="display: flex; gap: 10px;"> <input type="checkbox"/> APPLICATION <input type="checkbox"/> RENEWAL <input type="checkbox"/> CANCELLATION </div> DATE </div> </div>																															