Attachment 1



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

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

	1 ACCOMBLISH TH	S FORM CORRECTL	2 2 3 4 4 5 4	A DDD CODIL TE DOVE		11/11			
INSTRUCTIONS:		EGIBLY IN CAPITAL I		APPROPRIATE BOXE	ES WITH CHECK	*			
TYPE OF APPLICATION:	X NEW	RENEWAL	CANCELLATION, p	lease proceed em Nos. 24-32	OLD RISK NUMBER:				
1. NAME									
ESTEVES Surna		RONNELE	N/A		TEJADA				
2. ADDRESS	me	Given Name	Name E	xt. (e.g., Jr.)	Middle Name				
2. ADDRESS YAV	Y YAWI II, MURTHA, SAI	JOSE OCCIDENTAL	MINDORO, OCCIDENTA	AL MINDORO		040000000000000000000000000000000000000			
3. DATE OF BIRTH	mm/dd/yyyy)	4. PLACE OF BIR	тн			PASSPORT SIZE ID PHOTO			
06/27/1997		YAW YAWI II, N	MURTHA, SAN JO	SE OCCIDENTAL	MINDORO				
5. SEX		7.CIVIL STATUS		8. CONTACT					
X MALE	FEMALE	X SINGLE	WIDOWED	955377761	Hombert				
6. TIN	FEMIALE	SINGLE	WIDOWED	9. EMAIL ADI	DESS				
340004772		MARRIED	SEPARATED		daesteves@gmail.co				
10. MONTHLY INCO 17,000.00	ME (Salaries, allowa	nces,business inc	ome and the like)	11. ESTIMAT	ED MONTHLY EXPEN	ISES			
-	on congrated from	the conice in any	of the fellowing me			rom the rolls, dismissal,			
termination, end of	term, finished contr	act or phased out (abolition) in the pu	odes: resignation, i iblic or private sec	retirement, aropped to ctor?	rom the rolls, dismissal,			
YES	X NO		,, ,						
If yes, give									
, 500, g. 10									
13. a. Have you ever	been charged of ar	y administrative a	nd/or criminal			any administrative and/or			
offense?	X NO			- Control of the Cont		body, tribunal or court?			
If yes, give				YES #	X NO				
	Case No/s. Case No/s.								
ouse mos.									
14. CHARACTER RE		al must not be relate	d up to the fourth de	gree by consanguin	ity or affinity to applica	nt)			
14. CHARACTER REFERENCE (Individual must not be related up to the fourth degree by consanguinity or affinity to applicant) NAME ADDRESS CONTACT NUMBER EFREN L. DELOS REYES LABANGAN, SAN JOSE OCCIDENTAL 9268075831									
					9268075831				
KARINA TRIC			GAN, SAN JOSE		9178298737				
CELSO B. ALI	MAZAN	MAMBU	JRAO, OCCIDEN	TAL MINDORO	9054706695				
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 Is ID/License/Pas Date/Place of I	sport Number	PRC CARD 27/332 7/01/2018 LUG	CENA CITY,		ADA ESTEVES N/A ure over Printed Name /Di				
16. SUBSC ID as indicated	RIBED AND SWORI above.	N to before me this_		, affiant ex	xhibiting his/her validly	issued Government			
Doc. No. Page No. Book No. Series of					Signature of Office	er/Person Administering Oath			

17. AMOUNT OF ACCOUNTABILITY		18. NAME OF OFFICE OR AGENCY	
	AMOUNT OF ACCOUNTABILITY	DENR, PENRO OCCIDENTAL MINDORO	
(a) Public Funds		19. ADDRESS OF OFFICE OR AGENCY	
(1) As Collecting Officer (2) As Disbursing Officer	P 300,000,00 300,000,00	MAMBURAO OCCIDENTAL MINDORO (CAPITAL), OCCIDENTAL MINDORO	
(3) As Signing Officer	0,00	Municipality/City Province	
(4) Investment Officer (GS Investments, Time Deposits, etc.)	0.00	20. STATION/DIVISION (Place of assignment) CENRO SAN JOSE OCCIDENTAL MINDORO	
(b) Public Property (1) Inventories (per GAAM) (2) Property, Plant & Equipment (Net Book Value)	P 0.00	21. TITLE OF POSITION OR DESIGNATION SPECIAL COLLECTING OFFICER (SCO), SPECIAL DISBURSING OFFICER (SDO) 22. DATE OF DESIGNATION OR ASSUMPTION OF ACCOUNTABILITY	
(c) Forms and other valuables			
(1) Internal Revenue Stamps	P 0.00	2023 05 08 Year Month Day	
(2) Postage and other Stamped Stock	0.00	Year Month Day	
(3) Official Receipt	0.00	23. BOND PERIOD COVERAGE	
(4) Others Forms and valuables	0.00	X One (1) year	
TOTAL AMOUNT	P 600,000.00	Two (2) years	
	And the state of t	Three (3) years	
THIS BLOCK TO	BE FILLED ONLY IN CASE OF	F BOND CANCELLATION	
24. OFFICE OR AGENCY AND STATION			
25. NAME OF OFFICERS TO BE RELIEVED		26. PRESENT POSITION OR DESIGNATION	
Surname Given Name	Middle Name		
27. AMOUNT OF BOND		28. RISK NUMBER AND EFFECTIVITY DATE	
29. DATE OF RELIEF		30. CAUSE OF RELIEF	
Year Month	Day		
 THIS IS TO CERTIFY THAT, as Head of Agency of the answers to the questions contained on the far applicant is a safe and conservative risk. Hence, the 	ce of this form and found the	, I verified the truthfulness of nem correct insofar as can be ascertained and that the	
X Application for Bonding New Renewal Cancellation of Bond			ca
of the above accountable public officer.		FELIX S. MIRASOL, JR, 07/28/2023	
		AGENCY APPROVER	
		Signature over Printed Name of Head of the Agency/Date Accomplished	,
	HIS BLOCK TO BE FILLED BY	BTrONLY	
32. AMOUNT OF BOND RECOMMENDED		33. AMOUNT OF BOND PREMIUM PAYABLE	
	350,250.00	5,253	3.75
This is to certify that I have carefully evaluated the r of Fidelity Bond of the above-mentioned account		APPLICATION RENEWAL CANCELLATION	N
Name & Signature of BTr Officer		DATE	



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)

NUM	BER shed by I	BTr Offi	cer)	

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

INSTRUCTIONS: 1. ACCOMPLISH THIS FORM C 2. PRINT ENTRIES LEGIBLY IN		PROPRIATE BOXES	WITH CHECK	n√n
TYPE OF X NEW RENEWA		n Nos. 24-32	LD RISK NUMBER:	
2 ADDRESS	ven Name Ext.	(e.g., Jr.)	JADA Middle Name	
06/27/1997 YAW Y 5. SEX 7.CIVIL 8	E OF BIRTH /AWI II, MURTHA, SAN JOSI	***************************************		PASSPORT SIZE ID PHOTO
6. TIN 340004772 M	MARRIED SEPARATED	9. EMAIL ADDR ronneletejadae	ESS esteves@gmail.co	m
10. MONTHLY INCOME (Salaries, allowances, bus 17,000.00	iness income and the like)	11. ESTIMATED 12,000.00	MONTHLY EXPEN	SES
12. Have you ever been separated from the service termination, end of term, finished contract or phosphology. YES X NO If yes, give details:	ased out (abolition) in the pub	lic or private sector	?	
13. a. Have you ever been charged of any administration offense? YES NO If yes, give details: Case No/s. Date Filed: Status of Case/s:			any administrative X NO details: No/s.	any administrative and/or body, tribunal or court?
14. CHARACTER REFERENCE (Individual must no NAME EFREN L. DELOS REYES KARINA TRICIA D, SY CELSO B, ALMAZAN	ADDRESS LABANGAN, SAN JOSE O LABANGAN, SAN JOSE O MAMBURAO, OCCIDENTA	CCIDENTAL CCIDENTAL		act number
15. I declare that the answer to the foregoing misrepresentation made in this application against me. Government Issued ID PRC 0 ID/License/Passport Number 07/01/01/01/01/01/01/01/01/01/01/01/01/01/	on and supporting document	ts shall cause the	e filing of adminis	trative/criminal case(s)
SUBSCRIBED AND SWORN to before ID as indicated above.	e me this	, affiant exhil	biting his/her validly i	ssued Government
Doc. No. Page No. Book No. Series of			Signature of Office	ar/Person Administering Oath

17. AMOUNT OF ACCOUNTABILITY		18. NAME OF OFFICE OR AGENCY
	AMOUNT OF ACCOUNTABILITY	DENR, PENRO OCCIDENTAL MINDORO
(a) Public Funds		19. ADDRESS OF OFFICE OR AGENCY
(1) As Collecting Officer (2) As Disbursing Officer	P 300,000,00	MAMBURAO OCCIDENTAL MINDORO (CAPITAL), OCCIDENTAL MINDORO
(3) As Signing Officer	300,000,00	Municipality/City Province
	0.00	20. STATION/DIVISION (Place of assignment)
(4) Investment Officer (GS Investments, Time Deposits, etc.)	0.00	CENRO SAN JOSE OCCIDENTAL MINDORO
(b) Public Property		21. TITLE OF POSITION OR DESIGNATION
(1) Inventories (per GAAM) (2) Property, Plant & Equipment (Net Book Value)	P 0.00 0.00	SPECIAL COLLECTING OFFICER (SCO), SPECIAL DISBURSING OFFICER (SDO) 22. DATE OF DESIGNATION OR ASSUMPTION OF
		ACCOUNTABILITY
(c) Forms and other valuables		0000
	_	2023 05 08
(1) Internal Revenue Stamps (2) Postage and other Stamped Stock	P0.00	Year Month Day
(3) Official Receipt	0.00	23. BOND PERIOD COVERAGE
(4) Others Forms and valuables	0.00	ZS. BOND FERIOD COVERAGE
,,,		X One (1) year
TOTAL AMOUNT	P 600,000.00	Two (2) years
		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		26. PRESENT POSITION OR DESIGNATION
Surname Given Name	Middle Name	
27. AMOUNT OF BOND	Middle Name	28. RISK NUMBER AND EFFECTIVITY DATE
27. AMOUNT OF BUND		26. RISK NUMBER AND EFFECTIVITY DATE
29. DATE OF RELIEF		30. CAUSE OF RELIEF
Year Month	Day	
	DENR, PENRO OCCIDENTAL MI	
31. THIS IS TO CERTIFY THAT, as Head of Agency of the answers to the questions contained on the fa-		them correct insofar as can be ascertained and that the
applicant is a safe and conservative risk. Hence, the	e undersigned is recommen	ding approval and authorizing the request for
	,	and additionally the requestion
X Applicatiom for Bonding		
X New		
Renewal		
Cancellation of Bond		
of the above accountable public officer.		FELIX S. MIRASOL, JR, 07/28/2023
		AGENCY APPROVER
		Signature over Printed Name of Head of the Agency/Date Accomplished
1	HIS BLOCK TO BE FILLED B	Y BTr ONLY
32. AMOUNT OF BOND RECOMMENDED		33. AMOUNT OF BOND PREMIUM PAYABLE
	350,250.0	5,253.75
		0,200.70
This is to certify that I have carefully evaluated the r of Fidelity Bond of the above-mentioned accoun		APPLICATION RENEWAL CANCELLATION
Name & Signature of BTr Officer		DATE





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

RISH	KNUMBE	R		
(to be	accomplishe	d by BT	r Officer)	

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

INSTRUCTIONS:	ACCOMPLISH THE PRINT ENTRIES LE			K APPROPR	IATE BOXES	WITH CHECK	n 🗸 n
TYPE OF APPLICATION:	X NEW	RENEWAL	CANCELLATION,	please proc		DLD RISK NUMBER:	
1. NAME ESTEVES Surnan 2. ADDRESS YAW	10	RONNELE Given Na	me N/A Name (AL MINDORO, OCCIDEN	Ext. (e.g., Ji	:)	EJADA Middle Name	
3. DATE OF BIRTH (n 06/27/1997 5. SEX MALE		4. PLACE OF I	BIRTH II, MURTHA, SAN J JS	OSE OCC			PASSPORT SIZE ID PHOTO
6. TIN 340004772		MARRI	the same of the sa	D ro	Name and Address of the Owner, where the Owner, which the	esteves@gmail.co	
10. MONTHLY INCOM 17,000.00				1	2,000.00	MONTHLY EXPEN	
YES If yes, give d	NO NO	act or phased o	out (abolition) in the p	public or p	rivate secto		rom the rolls, dismissal,
Date	X NO	y administrativ	e and/or criminal	criminal	case before YES If yes, give Case I Date F	a any administrativo X NO details: No/s. Filed:	any administrative and/or e body, tribunal or court?
EFREN L. DEL KARINA TRICI. CELSO B. ALM	OS REYES A D. SY	LAB LAB	ADDRI ANGAN, SAN JOSE ANGAN, SAN JOSE ANGAN, SAN JOSE MBURAO, OCCIDE	ESS E OCCIDE E OCCIDE	NTAL NTAL		nt) FACT NUMBER
 I declare that the misrepresentation against me. 	e answer to the form made in this a	oregoing ques	tions are true to the	e best of r	my knowled	lge and belief. I fu e filing of adminis	ully understand that any strative/criminal case(s)
Government Iss ID/License/Pass Date/Place of Is	port Number	PRC CARD: 027332: 07/01/2018	LUCENA CITY,	RONN		DA ESTEVES N/A over Printed Name /D	
16. SUBSCF ID as indicated a	RIBED AND SWORM	I to before me th	nis		, affiant exhi	biting his/her validly	issued Government
Doc. No. Page No. Book No. Series of						Signature of Office	er/Person Administering Oath

17. AMOUNT OF ACCOUNTABILITY		18. NAME OF OFFICE OR AGENCY
	AMOUNT OF	DENR, PENRO OCCIDENTAL MINDORO
	ACCOUNTABILITY	
(a) Public Funds		19. ADDRESS OF OFFICE OR AGENCY
(1) As Collecting Officer	P300,000.00	MAMBURAO OCCIDENTAL MINDORO (CAPITAL),
(2) As Disbursing Officer	300,000,00	OCCIDENTAL MINDORO
(3) As Signing Officer	0,00	Municipality/City Province
(4) Investment Officer (GS Investments, Time		20. STATION/DIVISION (Place of assignment) CENRO SAN JOSE OCCIDENTAL MINDORO
Deposits, etc.)	0.00	CENTO SAN JOSE OCCIDENTAL MINDORO
(b) Public Property		21. TITLE OF POSITION OR DESIGNATION
(1) Inventories (per GAAM) (2) Property, Plant & Equipment (Net Book Value)	P 0.00 0.00	SPECIAL COLLECTING OFFICER (SCO), SPECIAL DISBURSING OFFICER (SDO)
		22. DATE OF DESIGNATION OR ASSUMPTION OF ACCOUNTABILITY
(c) Forms and other valuables		
(-,-		2023 05 08
(1) Internal Revenue Stamps	P0.00	Year Month Day
(2) Postage and other Stamped Stock (3) Official Receipt	0.00	23. BOND PERIOD COVERAGE
(4) Others Forms and valuables	0.00	23. BOND PERIOD COVERAGE
	***************************************	X One (1) year
TOTAL AMOUNT	P 600,000,00	Two (2) years
		Three (3) years
THIS BLOCK TO	BE FILLED ONLY IN CASE OF	F BOND CANCELLATION
24. OFFICE OR AGENCY AND STATION		
25. NAME OF OFFICERS TO BE RELIEVED		26 DESCRIT DOSITION OF DESIGNATION
20. NAME OF OFFICERS TO BE RELIEVED		26. PRESENT POSITION OR DESIGNATION
Surname Given Name	Middle Name	
27. AMOUNT OF BOND		28. RISK NUMBER AND EFFECTIVITY DATE
29. DATE OF RELIEF		30. CAUSE OF RELIEF
Year Month	DENR, PENRO OCCIDENTAL MIND	OORO
31. THIS IS TO CERTIFY THAT, as Head of Agency of	f	I verified the truthfulness of
applicant is a safe and conservative risk. Hence, the	ce of this form and found the	em correct insofar as can be ascertained and that the
Company of the control of the contro	didensigned is recommend	ing approval and authorizing the request for
X Applicatiom for Bonding		
X New		
Renewal		
Cancellation of Bond		
of the above accountable public officer.		FELIX S. MIRASOL, JR, 07/28/2023
		AGENCY APPROVER
		Signature over Printed Name of Head of the Agency/Date
		Accomplished
	HIS BLOCK TO BE FILLED BY	BTr ONLY
32. AMOUNT OF BOND RECOMMENDED		33. AMOUNT OF BOND PREMIUM PAYABLE
	350,250.00	5,253.75
This is to cortifu that I have a set if		
This is to certify that I have carefully evaluated the r of Fidelity Bond of the above-mentioned account	equest for lable public officer.	APPLICATION RENEWAL CANCELLATION
Name & Signature of BTr Officer		DATE

Name of Office: Department of Environment and Natural Resources (DENR), Office of the Secretary, PENRO Occidental Mindoro

LIST OF BONDED ACCOUNTABLE PUBLIC OFFICERS

me	ed na	Signature over printed name Position	Sign		Signature over printed name Position
	= {	ACCOUNTANT III			CASHIER
SINA	11 3	DONEBRA S. MESINA	D		MARIA JESSIDA P. DEL ROSARIO
		*	Reviewed By:		
600,000.00 350,250.00					
				(SDO)	
		***************************************		(2) Special Disbursing Officer	NEW Y
				(SCO)	N I I I
600,000.00 350,250.00				(1) Special Collecting Officer	ESTEVES, RONNELE N/A
		ewal	For renewal		
ACCOUNTABILITY BOND			10	Signing Officer)	
		KINK NO.	-	(e.g. Disbursing/Collecting/	NAME OF PUBLIC OFFICER APPLICATION
AMOUNT			EFFECTIVE DATE	DESIGNATION	TYPE OF
		AR'S DATA	PREVIOUS YEAR'S DATA		

Date: 07/28/2023

Name of Office: Department of Environment and Natural Resources (DENR), Office of the Secretary, PENRO Occidental Mindoro

LIST OF BONDED ACCOUNTABLE PUBLIC OFFICERS

1e	Signature over printed name	Signal			d name	Signature over printed name	Signatu			name	Signature over printed name	
	OIC PENRO				Ξ	ACCOUNTANT III	A				CASHIERI	
	ERNESTO E TAÑADA	92			SINA	DONEBETHE S. MESINA	DONE			OSARIO	MARIA JESSIGA P. DEL ROSARIO	
	ified and Approved By	etified and A	C		*	•	Reviewed By:	20			Prepared By:	
	7		5,253.75	350,250.00	600,000.00						Totals	
									(SDO)			
									(2) Special Disbursing Officer			
									(SCO)	N III	TEJADA	-
Not Applicable	ON	1 yr(s)	5,253.75	350,250.00	600,000.00				(1) Special Collecting Officer		ESTEVES, RONNELE N/A	
OF PENALTY?	CASE (Yes or No)		PREMIUM	BOND	ACCOUNTABILITY		For renewal					
STATUS OF THE	AND/OR CRIMINAL	000					1 To	From	Signing Officer)	APPLICATION		
WHAT IS THE	111	BOND				RISK NO.	EFFECTIVE DATE	EFFE	(e.a. Disbursing/Collecting/	TYPE OF	NAME OF PUBLIC OFFICER	
IF FOUND GUILTY.	WITH PENDING			AMOUNT					DESIGNATION			
RKS	REMARKS					'S DATA	PREVIOUS YEAR'S DATA	PR				
												1

Date: 07/28/2023

Position

Position

Signature over printed name Designation of Authorized Official

Name of Office: Department of Environment and Natural Resources (DENR), Office of the Secretary, PENRO Occidental Mindoro

LIST OF BONDED ACCOUNTABLE PUBLIC OFFICERS

Signature over printed name Position	CASHIERI	MARIA JESSIÇA P. DEL ROSARIO	Prepared By:	Totals		111111111111111111111111111111111111111	TEJADA	ESTEVES, RONNELE N/A		APPLICATION	NAME OF PUBLIC OFFICER		7
					(SDO)	(2) Special Disbursing Officer	(SCO)	(1) Special Collecting Officer		Signing Officer)	(e.g. Disbursing/Collecting/	DESIGNATION	
			Revie							From		EFFECTIVE DATE	PREVIO
Signatun	AC	DONE	Reviewed By:						For renewal	То		VE DATE	PREVIOUS YEAR'S DATA
Signature over printed name Position	ACCOUNTANT III	DONEBEILE S. MESINA									RISK NO.		SDATA
d name	Ξ	SINA	•	600,000.00				600,000.00	ACCOUNTABILITY				
				350,250.00				350,250.00	BOND			AMOUNT	
				5,253.75			14.5	5,253.75	PREMIUM				
Sign Design			Certified and	5				5 1 yr(s)			COVERAGE	BOND	
Signature over printed name Designation of Authorized Official	OIC PENRO	SRNESTO E. TAÑADA	Certified and Approved By:					NO	CASE (Yes or No)	AND/OR CRIMINAL	ADMINISTRATIVE	WITH PENDING	REM
me								Not Applicable	OF PENALTY?	STATUS OF THE	WHAT IS THE	IF FOUND GUILTY,	REMARKS

Date: 07/28/2023