CS Form No. 33-B
Revised 2017

CIVIL SERVICE COMMISSION
RECEIVED
DEC 29 2017
(Stamp of Date of Receipt)
CAGAYAN / BATANES
FIELD OFFICE
TUGUEGARAO CITY
96

DILG

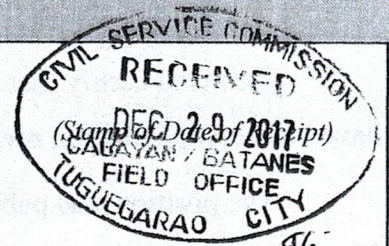## Republic of the Philippines
DEPARTMENT OF THE INTERIOR AND LOCAL GOVERNMENT
REGION 02
Regional Government Center, Carig Sur, Tuguegarao City, Cagayan

Mr./Mrs./ Ms.: **CHARLOTTE JENNIFER M. AGGABAO**

You are hereby appointed as <u>Local Government Operations Officer VI</u> (SG-22)

under <u>Permanent</u> status at the <u>Department of the Interior and Local Government</u> with
(Permanent, Temporary, etc)   (Office/Department/Unit)

a compensation rate of <u>Fifty-Two Thousand Seven Hundred Eighty-Three Pesos (P 52, 783.00)</u>

per month.

The nature of this appointment is <u>"Reclassification of Position"</u> with NOSCA Serial
(Original, Promotion, etc)

<u>No. 0002017-10-104</u>   vice _____, who

_____ with Plantilla Item No. <u>OSEC-DILGB-LGOO6-1123-2017</u>
(Transferred, Retired, etc.)

Page <u>9 of 22</u>.

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

Very truly yours,

(sgd.)

VALIDATED

^

JONATHAN PAUL M. LEUSEN, JR., CESO IV
Regional Director
Appointing Officer/Authority

(sgd.)

JONY V. MIGUEL
ACTING DIRECTOR II

November 21, 2017
Date of Signing

Accredited/Deregulated Pursuant to
CSC Resolution No. <u>031157</u>, s.2003
dated <u>November 17, 2003</u>

(Stamp of Date of Release)

Certification

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

The position was published at _____EXEMPTED_____ from _____ to _____, 20_____ and posted in _____ from _____ to _____, 20_____ in consonance with RA No. 7041. Regional Personnel Selection and Promotion Board (RPSPB) started on _____, 2017.

(sgd.)

_____EDNA V. MUNGCAL_____
Highest Ranking HRMO

Certification

This is to certify that the appointee has been screened and found qualified by the majority of the RPSPB during the deliberation held on _____.

_____
Chairperson, RPSPB

CSC/HRMO Notation

ACTION ON APPOINTMENTS			Recorded by
☐ **Validated per RAI for the month of** _____			
☐ **Invalidated per CSCRO/FO letter dated** _____			
	DATE FILED	STATUS	
☐ **Appeal**			
☐ CSCRO/ CSC-Commission			
☐ **Petition for Review**			
☐ CSC-Commission			
☐ Court of Appeals			
☐ Supreme Court			

	Acknowledgement
Original Copy - for the Appointee Original Copy - for the Civil Service Commission Original Copy - for the Agency	*Received original/photocopy of appointment on*_____ _____ Appointee