



Department of Justice  
**OFFICE OF THE SECRETARY**  
 Manila  
**CLEARANCE**

DOJ Clearance Form  
 Revised April 2013

This is to certify that \_\_\_\_\_, \_\_\_\_\_ in \_\_\_\_\_  
 (full name) (position)  
 and presently residing at \_\_\_\_\_ with contact details \_\_\_\_\_, has been  
 (residence address) (contact number/person)  
 Cleared all accountabilities as of the end office of hours \_\_\_\_\_, 20\_\_\_\_\_  
 (date last day of service)

PURPOSE OF CLEARANCE \_\_\_\_\_ Effective on \_\_\_\_\_  
 Cleared of all work assignments and recommending approval \_\_\_\_\_  
 Head of Office Date

	AUTHORIZED SIGNATORY	DATE
<b>1. Outstanding Loan Accounts</b>		
OSJEMPC	_____	_____
NPLP	_____	_____
SPPAAI	_____	_____
JUSLA	_____	_____
<b>2. No Pending Administrative Cases</b>		
National Prosecution Service	_____	_____
Technical Staff	_____	_____
<b>3. Witness Protection Program, Property &amp; Money Accountability</b>		
Program Director/Assistant Director	_____	_____
Special Disbursing Officer	_____	_____
Regional Implementor	_____	_____
<b>4. Inter-Agency Council Against Trafficking (IACAT), Money &amp; Property Accountability</b>		
Budget Division _____	_____	_____
IACAT Secretariat	_____	_____
<b>5. DOJ Library (Book accountability)</b>		
<b>6. Management Information System Division (e-mail address accountability)</b>		
<b>7. Financial Service (Outstanding/Unliquidated Cash Advances)</b>		
Budget Division      Accounting Division		
MOOE _____	_____	_____
BOC _____	_____	_____
TEV Local/Foreign _____	_____	_____
RA 9279 (as collecting officer)	_____	_____
<b>8. Administrative Service</b>		
Records Section (records on file)	_____	_____
Supply Section (property accountabilities)	_____	_____
Personnel Division (SALN, ID card & ATM Card)	_____	_____
Leave Section (Service obligation)	_____	_____
Total Leave Credits broken down as		
Vacation Leave _____		
Sick Leave _____		
Payroll Section		
(Money accountabilities for DOJ Proper/Regional/Provincial/City)		
Overpayment		
Salary _____		
PERA _____		
RATA _____		
Bonus/Cash Gift _____		
Others _____		
Total Overpayment _____		
Removed from Payroll effective		
Final Salary _____		
Final RATA/PERA _____		
Check/fill out the appropriate space provided		
<input type="checkbox"/> Refunded under O.R. No. _____ dated _____		
<input type="checkbox"/> To be deducted from terminal leave benefit/retirement gratuity		
Other Accountabilities		
PLDT _____		
NSFD _____		

Approved

\_\_\_\_\_  
Director, Financial Service      Date
\_\_\_\_\_  
Director, Administrative Service      Date

NOTE: Issuance of clearance does not relieve the official or employee of accountabilities