

Republic of the Philippines
City Government of Davao

NON-DISCLOSURE AGREEMENT

This is to certify that I, (Complete Name) _____,
(Position Title) _____ of the
(Department/Office) _____, City
Government of Davao, understand that I cannot give out or share any official record obtained
or accessed from/thru and/or involving the use of the Davao City Records Management
System (CRMS) without proper authority or unless in connection with my official functions or
in pursuance of official City transactions and processes.

I understand that any unauthorized release or negligence in the handling of the
abovementioned information is considered a breach of confidence and prejudicial to the best
interest of the City Government of Davao.

I further understand that any such breach may give rise to grounds for administrative or
criminal liabilities as provided under existing laws.

Done in the City of Davao, this _____ day of _____ 20_____.

[Name and Signature of Employee]

[Identification Card Number]

PERSONALLY SIGNED BEFORE ME:

Name and Signature of
Department Head/Chief of Office

Date