SWORN STATEMENT OF ASSETS, LIABILITIES AND NET WORTH

| | | As of | equired by R.A. 6 | | | | |
|---------------------------------------|---|------------------------------|-----------------------|-------------------------------------|-----------|----------------|----------------------------|
| Note | : Husband and wif | e who are both public offici | - | • | d stateme | ents iointlu o | r separatelu. |
| | | | ☐ Separate Fi | | | | |
| DECLARANT: | | | | POSITION: | | | |
| ADDRESS: | (Family Name) | (First Name) | (M.I.) | AGENCY/OFFICE: OFFICE ADDRESS | . — | | |
| | | | | | | | |
| SPOUSE: | | | | POSITION: | | | |
| | (Family Name) | (First Name) | (M.I.) | AGENCY/OFFICE: OFFICE ADDRESS | | | |
| | | | | | | | |
| | | | 44.0) 777.470.4 | | | | |
| <u>UNMARRI</u> | | BELOW EIGHTEEN | (18) YEARS (| | IN DEC | LARANT' | |
| | NAM | E | | DATE OF BIRTH | | | AGE |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | ASSETS II | ARILITIES AN | D NETWORTH | | | |
| | (Includi | ing those of the spous | e and unmarr | ied children belot | v eighte | en (18) | |
| 1 400070 | | years of age l | iving in declar | ant's household) | | | |
| 1. ASSETS a. Real | Properties* | | | | | | |
| DESCRIPTION | KIND | EXACT | ASSESSED | CURRENT FAIR | ACQU | USITION | ACQUISITION |
| (e.g. lot, house and lot, condominium | (e.g. residential, commercial, industrial, | LOCATION | VALUE (As found in | MARKET VALUE the Tax Declaration of | YEAR | MODE | COST |
| and improvements) | agricultural and mixed usel | | | al Property) | IDAK | MODE | |
| | | | | | | | |
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| | | | | | | | |
| | | | | | | | |
| | | | | | | Subtotal: | |
| b. Person | al Properties* | | | | | | |
| b. Person | _ | SCRIPTION | | YEAR A | CQUIREI | | ACQUISITION COST/AMOUNT |
| b. Person | _ | SCRIPTION | | YEAR A | | | ACQUISITION COST/AMOUNT |
| b. Person | _ | SCRIPTION | | YEAR A | | | ACQUISITION COST/AMOUNT |
| b. Person | _ | SCRIPTION | | YEAR A | | | ACQUISITION COST/AMOUNT |
| b. Person | _ | SCRIPTION | | YEAR A | CQUIREI | | ACQUISITION COST/AMOUNT |

^{*} Additional sheet/s may be used, if necessary.

2. LIABILITIES*

| NATURE | NAME OF CREDITORS | OUTSTANDING BALANCE |
|--------|-------------------|---------------------|
| | | |
| | | |
| | | |
| | | |

TOTAL LIABILITIES:

NET WORTH: Total Assets less Total Liabilities =

* Additional sheet/s may be used, if necessary.

BUSINESS INTERESTS AND FINANCIAL CONNECTIONS

(of Declarant's spouse/ Unmarried Children Below Eighteen (18) years of Age Living in Declarant's Household) \square I/We do not have any business interest or financial connection.

| NAME OF ENTITY/BUSINESS ENTERPRISE | BUSINESS ADDRESS | NATURE OF BUSINESS INTEREST &/OR FINANCIAL CONNECTION | DATE OF ACQUISITION OF INTEREST OR CONNECTION |
|---------------------------------------|------------------|---|---|
| | | | |
| | | | |
| | | | |
| | | | |

RELATIVES IN THE GOVERNMENT SERVICE

(Within the Fourth Degree of Consanguinity or Affinity. Include also Bilas, Balae and Inso)

☐ I/We do not know of any relative/s in the government service)

| NAME OF RELATIVE | RELATIONSHIP | POSITION | NAME OF AGENCY/OFFICE AND ADDRESS |
|------------------|--------------|----------|-----------------------------------|
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

I hereby certify that these are true and correct statements of my assets, liabilities, net worth, business interests and financial connections, including those of my spouse and unmarried children below eighteen (18) years of age living in my household, and that to the best of my knowledge, the above-enumerated are names of my relatives in the government within the fourth civil degree of consanguinity or affinity.

I hereby authorize the Ombudsman or his/her duly authorized representative to obtain and secure from all appropriate government agencies, including the Bureau of Internal Revenue such documents that may show my assets, liabilities, net worth, business interests and financial connections, to include those of my spouse and unmarried children below 18 years of age living with me in my household covering previous years to include the year I first assumed office in government.

| Date: | |
|---|---|
| (Signature of Declarant) | (Signature of Co-Declarant/ Spouse) |
| Government Issued ID: ID No.: Date Issued: | Government Issued ID: ID No.: Date Issued: |
| SUBSCRIBED AND SWORN to before me government issued identification card. | thisday of, affiant exhibiting to me the above-stated |
| | (Person Administering Oath) |