SWORN STATEMENT OF ASSETS, LIABILITIES AND NET WORTH As of December 31, 2022

(Required by R.A. 6713)

		nt Filing		Separate Filing		Not Applicable	2	separately.
ECLARANT:	Bar	ntasan	Jade Barachi	iel D.		POSITION:	Instruct	OF LOWING
20210111		amily Name)	(First Name)	(M. I.)		AGENCY/OFFICE	10100 000000	
		Daniel Communication				OFFICE ADDRES	s: VSU Vis	sca Baybay, Leyte
DDRESS	Barte		Baranggay Guadali	upe Baybay City Leyte				+A-
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POUSE:		HA	(First Name)	(M. L)		POSITION:		111
	(F	family Name)	(First Name)	(M. I.)		AGENCY/OFFICE OFFICE ADDRESS		NA
					1	OFFICE ADDRES		V.
UNMAI	RRIE	D CHILDRE	n below eigh	ITEEN (18) YEARS	OF AGE LIV	ING IN DECLA	RANT'S HO	USEHOLD
			NAME			DATE OF B	IRTH	AGE
	NA	FOVERRMENT SERVICE			DEHT W	RELATIVE		<u> </u>
		Test freed	Ay	Arthur of Authority	Ye i più i i	M	BBOA BATTE	-
	_	- Contract	hospitalism of	ort to a sanduales us	ev na saransa A	Torrest Control	N.	
				TS, LIABILITIES AN				
	(Ir	icluding thos		and unmarried childr ing in declarant's hou			s of age	NAME OF RE
. ASSETS		APPRESS	uo	ing in declarant's not	seriolaj			
								, ,
a. Real Prope	rties	*		- Y - 7 1				
			EXACT		CURRENT			
DESCRIPTION		KIND	LOCATION	I ASSESSED VALUE	FAIR MARKET	ACQUISITION		ACQUISITION COST
(e.g. lot, house and lot		e.g.residential,		(As found in the Tax De		YEAR	MODE	
condominium and improvemental		nmercial, industrial, icultural and mixed		Real Propert	1	TEAR	MODE	
N/A		N/A	N/A	N/A	N/A	N/A	N/A	N/A
	3/20	rang gadi	Hall Hersely	r in stretote liste in	artico libra s	nese are in	i indi vit	I hereby w
N/A	34 U.	N/A	N/A	N/A	N/A	N/A	N/A	N ness interests
.vmu	Tip Inc	-university	alghei <i>deol</i> ach deorea of com	the attendant of the	Trismita y	Sub	total: P	umerated are
		157000 MAG						
b. Personal F	Tope	Itles		and the sections		assertion (ref)	adtaviod	Liberation Hill
		DESCI	RIPTION		Y	EAR ACQUIRED		ACQUISITION COST AMOUNT
aptop	шь о	MININ VIN	aman emanyo			2022		51,500.0
Mobile Phone		FE 11-1-11-11-11-11-11-11-11-11-11-11-11-1	Arrest Carlo Cities	nment,	pring hi sh	2022	rand Fredy	17,500.0
		1 1	1)					11.1
		1 1	1	(*)		< 1	N 2	IA
		1 1	1					171
			AU			Sul	ototal: P	69,000.0
						mom	- 1 - 22 T	69,000.0
		[panage			4	TOTAL ASSET	S (a + b): _	
2. LIABILITIES	*	pinisel	Z\mandler[.	Liver Secure		TOTAL ASSET	S (a + b):	
2. LIABILITIES	*	NAT	TURE	(Signatorium)		E OF CREDITO		OUTSTANDING BALANCE
2. LIABILITIES	*	NAT	TURE	The same of the sa				
≥. LIABILITIES	*	NAT	TURE	Signal Company of the				
2. LIABILITIES	*	NA	TURE	Fixo/Attendents//		E OF CREDITO	RS	BALANCE
. LIABILITIES	*	NA.	TURE	NETWORTH : 1	NAM	TOTAL LIABI	LITIES:	

BUSINESS INTERESTS AND FINANCIAL CONNECTIONS

(of Declarant/ Declarant's spouse/ Unmarried Children Below Eighteen(18) years of Age Living in Declarant Household)

☐ 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	
N/A	N/A	N/A	N/A	
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111	ode Sarro 1			

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 relavtive/s in the government service.

NAME OF RELATIVE	RELATIONSHIP	POSITION	NAME OF AGENCY/OFFICE AND ADDRESS	
	H		The state of the s	

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 relatives in the government within 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:	14/23	The Additional Additio	
00.000.00	Ath	AA	
(Signature of Declarant)		(Signature of Co-Declarant/Spouse)	
Government Issue	d IETIN ID	Government Issued ID:	
ID No.:	708-079-024	ID No. :	A STATE OF THE PARTY OF THE PAR
Date Issued:	9/11/2017	Date Issued:	
SUBSCRIBI above-stated gov	ED AND SWORN to before me this ernment issued identification car	d.	to me the

Page 2 of

ATTY. RYSAN C. GUINOCOR

Attorney IV