

SWORN STATEMENT OF ASSETS, LIABILITIES AND NETWORTH

As of August, 2014

(Required by R.A. 6713)

Note: Husband and wife who are both public officials and employees may file the required statements jointly or separately.

☐ Joint Filing

☐ Separate Filing

☒ Not Applicable

DECLARANT:

Gonzales

Rommel Jr.

M.

(Family Name)

(First Name)

(M. I.)

POSITION:

SIEME RESEARCH ASSISTANT

AGENCY/OFFICE:

PhilRocksops, Vals

OFFICE ADDRESS:

VSM, VISA, Pinyon City

lyte

ADDRESS

ILIHAN, MACDON, SOUTHERN LBYTE

SPOUSE:

NA

(Family Name)

(First Name)

(M. I.)

POSITION:

AGENCY/OFFICE:

OFFICE ADDRESS:

UNMARRIED CHILDREN BELOW EIGHTEEN (18) YEARS OF AGE LIVING IN DECLARANT'S HOUSEHOLD

NAME	DATE OF BIRTH	AGE
<u>NA</u>		

ASSETS, LIABILITIES AND NETWORTH

(including those of the spouse and unmarried children below eighteen (18) years of age living in declarant's household)

1. ASSETS

a. Real Properties*

DESCRIPTION <small>(e.g. lot, house and lot, condominium and improvements)</small>	KIND <small>(e.g. residential, commercial, industrial, agricultural and mixed)</small>	LOCATION	ASSESSED VALUE	CURRENT FAIR MARKET VALUE	ACQUISITION		ACQUISITION COST
			<small>(As found in the Tax Declaration of Real Property)</small>		YEAR	MODE	
<u>NONE</u>	<u>NONE</u>	<u>NONE</u>	<u>NONE</u>	<u>NONE</u>	<u>NONE</u>	<u>NONE</u>	<u>NONE</u>

Subtotal: P NONE

b. Personal Properties*

DESCRIPTION	YEAR ACQUIRED	ACQUISITION COST/AMOUNT
<u>Laptop</u>	<u>2013</u>	<u>P 24,500.00</u>

Subtotal: P 24,500.00

2. LIABILITIES*

Page 1 of 2

TOTAL ASSETS (a + b): 24,500.00

NATURE	NAME OF CREDITORS	OUTSTANDING BALANCE
<u>NONE</u>	<u>NONE</u>	<u>NONE</u>

TOTAL LIABILITIES: NONE

NETWORTH : Total Assets Less Total Liabilities = 24,500.00

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
None			

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
Rommel T. Gardo	Father	SP01	SLEPO, Masin City
Prince Elvis T. Gardo	Uncle	PO1	Mahaplag Police Station, Mahaplag Bay

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 :

(Signature of Declarant)

(Signature of Co-Declarant/Spouse)

Government Issued ID: Philhealth
ID No.: 13-025155634-3

Page 2 of 2
Government Issued ID: _____
ID No.: _____

Date Issued: _____

Date Issued: _____

SUBSCRIBED AND SWORN to before me this 4th day of September 2014, affiant exhibiting to me the above-stated government issued identification card.

ATTY. RYAN C. GUINOCOR