## SWORN STATEMENT OF ASSETS, LIABILITIES AND NET WORTH

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

As of December 31, 2023

(Required by R.A. 6713)

Separate Filing Joint Filing Not Applicable CATIBO DANIEL POSITION: INSTRUCTOR I DECLARANT: (M. I.) (First Name) (Family Name) VSU AGENCY/OFFICE: OFFICE ADDRESS: Baybay City, Leyte BRGY. JAENA, BAYBAY CITY, LEYTE ADDRESS N/A SPOUSE: **CATIBO NELLY JUN** POSITION: (M. L) (Family Name) (First Name) N/A AGENCY/OFFICE: OFFICE ADDRESS: N/A

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

 NAME
 DATE OF BIRTH
 AGE

 ELIANAH DANN E. CATIBO
 March 15, 2022
 26 MONTHS

## 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  (e.g. lot, house and lot condominium and improvements)	KIND  (e.g. residential, commercial, industrial, agricultural and mixed	EXACT LOCATION	ASSESSED VALUE	CURRE NT FAIR MARKE T VALUE	ACQU	ISITION	ACQUISITION COST
			(As found in the Tax Declaration of Real Property)		YEAR MODE		
N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A

Subtotal: P \_\_\_\_\_

92,000.00

92,000.00

# b. Personal Properties\*

DESCRIPTION	YEAR ACQUIRED	ACQUISITION COST/ AMOUNT
Motorcycle	2019	45,000.00
APPLIANCES	2022	12,000.00
JEWELRY	2022-2023	5,000.00
SMARTPHONES	202,120,222,023	25,000.00
PRINTER	2023	5,000.00
9	Subtotal: P	92, 000. 00

# 2. LIABILITIES\*

NATURE	NAME OF CREDITORS BAI	
N/A	N/A	N/A
	TOTAL LIABILITIES:	

NETWORTH: Total Assets Less Total Liabilities =

TOTAL ASSETS (a + b):

### 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.

BUSINESS ADDRESS	NATURE OF BUSINESS INTEREST &/OR FINANCIAL CONNECTION	DATE OF ACQUISITION OF INTEREST OR CONNECTION
N/A	N/A	N/A
		*
		BUSINESS ADDRESS INTEREST &/OR FINANCIAL CONNECTION

# RELATIVES IN THE GOVERNMENT SERVICE

(Within the Fourth Degree of Consanguinity or Affinity. Include also Bilas, Balae and Inso)  ${}_{\rm C} \ {\it I/We do not know of any relavtive/s in the government service.}$ 

NAME OF RELATIVE	RELATIONSHIP	POSITION	NAME OF AGENCY/OFFICE AND ADDRESS	
N/A	N/A	N/A	N/A	

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: MAY 3	1, 2024		
	fors	+	
Signature	of Declarant)	(Signature of Co-	Declarant/Spouse)
Government Issued	DRIVER'S LICENSE	Government Issued ID:	PHILHEALTH ID
ID No.:	H12-19-002716	ID No.:	16-201053454-2
Date Issued:	09/24/19	Date Issued:	2021
	O AND SWORN to before me nment issued identification	card.	A affiant exhibiting to me the