## SWORN STATEMENT OF ASSETS, LIABILITIES AND NET WORTH

As of **December 31, 2022** 

(Required by R.A. 6713)

Note: Husi	band a	nd wife who	are both public of	ficials and employ	jees may file t	he required s	statemen	ts jointl	y or sepa	rately.
	Join	t Filing	Ø	Separate Filing		Not Applie	cable			
DECLARANT:	TAN	l, (	GIDEON NIEL	D		POSITION:		Instru	ctor I	
		mily Name)	(First Name)	(M. I.)	•	AGENCY/OF	PICE:	VISAY	AS STAT	E UNIVERSITY
						OFFICE ADI	ORESS:	VISCA	, BAYBA	Y CITY, LEYTE
ADDRESS	APT	91, KILB	OURNE ST, V	SU, VISCA,						
	BAYE	AY CITY, LE	YTE		•					
	TAN	7/	DRABABEL	S.	•				-4	
SPOUSE:		mily Name)	(First Name)	(M. l.)	•	POSITION: AGENCY/OF	PECP.	Instru		TY FOUNDATION
	,		, ,	, ,		OFFICE ADI				, PAMPANGA
UNMARRI	ED C	HILDREN I	BELOW EIGHT	cen (18) Years	OF AGE L	IVING IN D	ECLAR	ants	HOUSE	HOLD
			NAME							AGE
	AI TH	RAME LEA FREYDEL S. TAN				DATE OF BIRTH JULY 29, 2019			ģ	year and 6 mo
	ALIT	EATREIDE	LO. IAN	· · · · · · · · · · · · · · · · · · ·	•		20, 2010		Ť	your und o mo
					•				+	
				· · · · · · · · · · · · · · · · · · ·	•					
			ASSETS	, Liabilities <i>i</i>	and netwo	RTH				
	(Incl	uding those	•	and unmarried c		v eighteen (	18) year	rs of		<u>†</u>
1 100770	•		age livi	ng in declarant's	household)					]
1. ASSETS		.*		N					:	<b>i</b> i
a Doel Drope									!	ko Wi
a. Real Prope	rues.									i. L
	T	1.50	1	TECHNOLOGY	CURRENT					26.30
DESCRIPTION		KIND	LOCATION	ASSESSED	PAIR MARKET	ACQU	ISITION			
gar againe, i i an calaig <u>i</u> i an c				400 P. D. A.A.	VALUE	1 th	· · · · · · · · · · · · · · · · · · ·		ACQUI	SITION COST
(e.g. lot, house and lot condominium and	comm	greatdential, creial, industrial,		(As found in the Tax Real Prop		YEAR	MOI	AEC		in the second
NONE	- restrict	NONE	NONE	NONE	NONE	NONE	NON	IE	السنة سنة	NONE
	-				VOND	NONE.	NON			WOMES
NONE		NONE	NONE	NONE	NONE	NONE	NON	i.E.		NONE
							Subtota	i: P		<u> </u>
b. Personal P	roner	tiec*								
b. I Cisonai I	Topci									
		DESCRI	PTION		YE	AR ACQUI	RD			TION COST/
LAPTOR (ACED A)		DE)			,	0016			A	HOUNT
LAPTOP (ACER AS		+ -		····		2016		$\longrightarrow$		37,000.00
CELLPHONE (SAI	MSUN	G A52)				2021				22,000.00
IPAD 5TH GEN						2018				17,000.00
PORTABLE SPEAKERS (SONY SRS-XB20)			2017					6,000.00		
Insurance Premium -Prulife			2016			$\Box$		110,016.00		
Insurance Premiu	ım -Pr	ulife		· · · · · · · · · · · · · · · · · · ·		2020		$\neg \uparrow$		96,000.00
		<del> </del>	-				Subtota	d: P		288,016.00
						FOTAL ASS				288,016.00
2. LIABILITIES	•					IOIAL ASS	ero (a	+ b). =		
		<del> </del>			1				OUT	STANDING
; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ;	·	NATU	RB.	and the second s	NAM	E OF CRED	ITORS		B	ALANCE
NA					NA					NA
NA					NA					NA
NA					NA					NA
						TOTAL LI	ABILIT	IES:		<u>-</u>
			F	ETWORTH : To	otal Assets 1	Less Total	Liabilit	ies =		288,016.00
#Additional about	hn •	<b>T</b>						=		<del></del>
*Additional sheet/s may	ne aseo	, a necessary.								. His
		1								1

## **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	NONE AC	NONE	NONE
NONE	NONE	NONE	NONE
NONE	FIG. YOU SON NONE	NONE	NONE
NONE	NONE	NONE	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 relautive/s in the government service.

NAME OF RELATIVE	RELATIONSHIP	POSITION	NAME OF AGENCY/OFFICE AND ADDRESS		
DANIEL LESLIE S. TAN	FATHER	PROFESSOR	VISAYAS STATE UNIVERSITY		
HANNAH PAMELA D. TAN	SISTER	MEDICAL OFFICER IV	NATIONAL CHILDREN HOSPITAL, QUEZON CITY		
LENI D. CAMACHO	AUNT	PROFESSOR	UNIVERSITY OF THE PHILIPPINES - LOS BANOS		
ANDREW EUSEBIO S. TAN	UNCLE	PROFESSOR	DON HIDALGO MEMORIAL STATE COLLEGE		
GRACE TAN *with additional sheets	AUNT	MEDICAL DOCTOR	BACOLOD CITY - DOH		

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	1,2023				
00.010.5RS	Lull + at 82 328 at IATOT				
(Signatur	re of Declarant)	(Signature of Co-Declarant/Spouse)			
Government Issued ID No.: Date Issued:	ID: DRIVER'S LICENSE H12-12-002130	Government Issued ID:  ID No.:  Date Issued:			
SUBSCRIBE above-stated gove	D AND SWORN to before me this	2 MAY 2023 affiant exhibiting to me the  RYSAN C. GUINOCOR  (Person Administering Oath)			