SWORN STATEMENT OF ASSETS, LIABILITIES AND NET WORTH As of DECEMBER 31, 2016

(Required by R.A. 6713)

DECLARANT	Dautil	Jane	P.	POSITION:	Instr	uctor -I	
DDRESS:	(Family Name)	(First Name) Brgy. Conalum	(M.I.)	AGENCY/OFFICE:		College of Veterinary Medicin Visayas State University, Visa	
1001000.	Inopacan	Leyte		OFFICE ADDRESS:		ay City Leyte	
SPOUSE:			275 L 195	POSITION:			
e de la constante de la consta	(Family Name)	(First Name)	(M.I.)	AGENCY/OFFICE: OFFICE ADDRESS:	E.		
UNMARRI	ED CHILDREN BE	LOW EIGHTEEN (18) YEARS C		IN DEC	LARANT'	
	NAW			DATE OF BIRTH			AGE
	(Including	ASSETS, LIA	and unmarr	ied children belou	w eighte	een (18)	
a. Real	(Including Properties*	those of the spouse	and unmarr	ied children belor cant's household)		usition	ACQUISITION
a. Real	Properties*	those of the spouse years of age liv	and unmarr ving in declar ASSESSED VALUE	ied children belot cant's household)	ACQU acceptable to the	JISITION	ACQUISITION COST
a. Real ESCRIPTION a.g. lot, house and ot, condominium	KIND (e.g. residential, commercial, industrial, agricultural and mixed use)	those of the spouse years of age liv EXACT LOCATION	and unmarriving in declar ASSESSED VALUE (As found in Re	current fair MARKET VALUE the Tax Declaration of all Property)	ACQU	VISITION MODE	COST
a. Real ESCRIPTION E.g. lot, house and ot, condominium and improvements)	Properties* KIND [e.g. residential, commercial, industrial, agricultural and mixed	those of the spouse years of age lii	and unmarrying in declar ASSESSED VALUE (As found in	current fair MARKET VALUE the Tax Declaration of	ACQU acceptable to the	JISITION	and the second places of the second
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2. LIABILITIES*

NATURE	NAME OF CREDITORS	OUTSTANDING BALANCE
None	None	None
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	TOTAL LIABILITIES:	None
NI	ET WORTH : Total Assets less Total Liabilities =	3600

BUSINESS INTERESTS AND FINANCIAL CONNECTIONS

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

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
N/A	N/A	N/A	N/A
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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.

(Signa	uture of Ipeclarant)	(Signature of Co-Declarant/Spouse)
Government Issued ID:	PRC	Government Issued ID:
ID No.:	0009109	ID No.:
Date Issued:	9/23/2016	Date Issued:
SUBSCRIBED AN		thisday of

(Pensoruladministering Oath)

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MCLE COMP. NO. V-0007782 - 07/20/15

POLL OF ATTORNEYS NO. 5746

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