# SWORN STATEMENT OF ASSETS, LIABILITIES AND NET WORTH

As of December 31, 2021

(Required by R.A. 6713)

ECLARANT:	AVEHIDO JERSOH			POSITION:	ADMIN AIDE I		
	(Family Name)	(First Name)	(M.I.)	AGENCY/OFFICE:	PhilRootcrop		
ADDRESS:	BRGY. PAHGAS	ITY LEYTE	OFFICE ADDRESS:	VSU, Bayba	VSU, Baybay City, Leyte		
	BATIENT C	JII/ CEPTIC	ANTA UNA	NESS INTERESTS	1840		
POUSE:	N/A AVEHIDO	ELAINE	n Below-Lights	POSITION:	NA	of Declarant E	
	(Family Name)	(First Name)	(M.I.)	AGENCY/OFFICE:	J I/We		
				OFFICE ADDDECC.			
120 September 1941	TOTAL OF SEC. 1	socurand an equal		OFFICE ADDRESS:	95-67	Terrina Construction and State	
NO NOT LA	JODA SE MISS.	TURE OF BUSINESS AND		OFFICE ADDRESS:	8853	ENTTY/BUSI SATERPRISE	
UNMARR	IED CHILDREN BI	ELOW EIGHTEEN (	TOME	SELECTION SINCE	N DECLARA	NT'S HOUSEHO	
UNMARR	IED CHILDREN BI NAM JOSE FELIX	ELOW EIGHTEEN (	TOME	OF AGE LIVING II  DATE OF BIRTH	013		
UNMARR	IED CHILDREN BI	ELOW EIGHTEEN (	TOME	OF AGE LIVING II  DATE OF BIRTH			

### ASSETS

## Real Properties\*

(e.g. lot, house and	KIND (e.g. residential,	EXACT LOCATION	VALUE	MARKET VALUE	ACQ	UISITION	cost
	commercial, industrial, agricultural and mixed use)		(As found in t	he Tax Declaration of al Property)	YEAR	MODE	
NOHE	issets, liabilities, ad unmarried chil	tatements of my a se of my spouse ar	and correct is netuding the	hese are true connections.	vethat nancia	ereby certification of the cer	business inte

# b. Personal Properties\*

DESCRIPTION	YEAR ACQUIRED	ACQUISITION COST/AMOUNT
r I first assumed office in government.	CY 2020 II of emerg eurolyerg ;	household covering
MC W/ SIDECAR	2017	65 000
TV '	2014	10,000
MASHING MACHINE	2014	4,000
(Denotors of the Declarant Spence)	- Commission of the publical	(2)
Government Issued ID: UPI = 12		Government Issued ID
Date Jasued:		ID No Date Issued:
2 8 APR 2022		
hateta amain act are of an idelicive annille. In with	alekan maked of Manua aut	Waltabatta

Subtotal:

TOTAL ASSETS (a+b):

<sup>\*</sup> Additional sheet/s may be used, if necessary.

#### 2. LIABILITIES\*

	NATURE			NAME OF CREDITORS	OUTSTANDING BALANCE
PAG-1BIG	SALARY	LOAH	PAG-	BIG	15 000
6515			GSIS		85,000

TOTAL LIABILITIES: |

**NET WORTH: Total Assets less Total Liabilities** 

## 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	
HOHE	SO OF AGE DEVING IN DE		BACK BY CHARACTER	
AGE	DATE OF BIRTH	am Alg	The state of the s	
			in appear and the second	

#### 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 RELA	TIVE	RELATIONSHIP	POSITION	NAME OF A	GENCY/OFFICE	AND ADDRESS
NOHE				ASSETS		
						W-1000 - 10
ACQUISITION	ACOUISITIO	SHALTWESTAU	c teasear.	TOAKS	COMEN	ESCRIPTION
		BUJAY TENEAM	STELAN	MOTTAGOU		

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 aboveenumerated 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.

Date: 04/29/2022	
SERSON B. AVENIDO (Signature of Declarant)	ELAIME (Signature of Co-Declarant/Spouse)
Government Issued ID: ID No.: Date Issued:  GETS UMID  621 1324 - 1928-3	Government Issued ID: UM ID IP ID No.: Date Issued:  On 23-8121743-8
SUBSCRIBED AND SWORN to before me this government issued identification card.	2 8 APR 2022  _day of, affiant exhibiting to me the above-stated

ATTY. RYSAMC. GUINOCOR

<sup>\*</sup> Additional sheet/s may be used, if necessary.