SWORN STATEMENT OF ASSETS, LIABILITIES AND NET WORTH

As of **December 31, 2019** 2022 — 7 (Required by R.A. 6713)

Note: H	the state of the s	fe who are both public offu Joint Filing	cials and employees □ Separate Fili				separate	ely. MAM	
DECLARANT:	OMEGA	RANDY	G.			ructor II	N/		
ADDRESS:	(Family Name	CLARO M. RECTO ST.	(M.I.)	AGENCY/OFFICE: OFFICE ADDRESS:			CITY L	EYTE	
_		BAYBAY CITY, LEYTE			-				
SPOUSE:		NA		POSITION:			NA		
	(Family Name	(First Name)	(M.I.)	AGENCY/OFFICE: OFFICE ADDRESS				NA NA	
	D CHILDRE	N BELOW EIGHTEE		OF AGE LIVING		CLARANT'		SEHOLD	
NAME NA		NAME		DATE OF BIRTH NA			AGE NA		
1. ASSETS	emilia dili di	ling those of the spou years of age	living in declara	ed children belou ant's household)	iii.anm	en (18) bas etse ga la eusa		busines elghteer	
		usedon no vingo indi						Olisai Olis	
(e.g. lot, house and lot, condominium	(e.g. residential, commercial, industr		VALUE	CURRENT FAIR MARKET VALUE	AC	QUISITION	A(COST	
	agricultural and mix use)			the Tax Declaration of al Property)	YEAR	MODE			
HOUSE	RESIDENTIA	C.M. RECTO ST. BAYBAY CITY, LEY	450,000	900,000	2013	BUILD	and ur	800,000	
LOT RESIDENTIAL		BITANHUAN, BAYE LEYTE	100,000	380,000	2021 PURCHAS		SED 190,000		
b. Personal	Properties*					Subtot	al: P	hP 990,000	
		DESCRIPTION		YEAR A	ACQUIRE	D		QUISITION T/AMOUNT	
MOTORCYCLE			(TI]	998		5	6,000.00	
HOME APPLIANCES			98.1	1995-	PRESENT	•	4	0,000.00	
JEWELRIES			1995-PRESENT		•	30,000.00			
BANK ACCOUNT	exhibiding to	meno. Val. 10	PIR VERTICA	1995-	PRESENT	BD AND	1905	38,891.00	
				line i mineso	dentilli	Subtotal :	PhP	664,891.00	
* Additional she		e used, if necessary.		тот	'AL ASS	ETS (a+b):	PhP	1,654,891.00	
	NATURE		NAME	OF CREDITORS	V 25	OUTS	TANDI	IG BALANC	
Loan (HELP)		GSI	GSIS				PhP 1	5,000	
				TOTAL LIA		-	PhP 1	5,000	

Date:

April 5, 2023

BUSINESS INTERESTS AND FINANCIAL CONNECTIONS

(of 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
16			Just Hiller
ST TATEL BAND TO SE	SAME OF A STORY	12 OT DES DE OSALT	ADDRESS

RELATIVES IN THE GOVERNMENT SERVICE

(Within the Fourth Degree of Consanguinity or Affinity. Include also Bilas, Balae and Inso) \square I/We do not know of any relative/s in the government service)

NAME OF RELATIVE	RELATIONSHIP	POSITION	NAME OF AGENCY/OFFICE AND ADDRESS	
REBECCA O. MONTALBAN	SISTER	DISTRICT NURSE	WESTERN LEYTE PROVINCIAL HOSPITAL	
357	STANL TO STAU		EMAN	
2/				

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 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.

	-27			
(Signa	ture of Declarant)	(Signature of Co-Declarant/ Spouse)		
Government Issued ID: ID No.: Date Issued:	VSU ID V000374 VSU, Baybay City, Leyte	Government Issued ID: ID No.: Date Issued:	SOTORCYCLE	
SUBSCRIBED ANI stated government issue		APPda , 2023 affiant exh	ibiting to me the above-	