## CHOLOGIANO MILOTARIA E MIAI GAGGARIA IN GORIANO

As of December 31, 2021

(Required by R.A. 6713)

DECLARANT: CANA (Family Name)		(First Name) (M. I.)			POSITION:		APM. AIDE IV	
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DDRESS	CALBIGA-	-A COTTAGE, VOU, PAN		RASINGAL	OFFICE ADDRESS:		VGU. PRINTING PREGS	
		AYBAY CIT		_				
POUSE:	CANA	EMILIANA	G.		POSITION:	н	DUGEWIFE	
-	(Family Name)	(First Name)	(M. I.)		AGENCY/OF			
					OFFICE ADI	DRESS:		
UNMARE	RIED CHILDREN	BELOW EIGHT	EEN (18) YEAR:	S OF AGE LI	VING IN D	ECLARANT	'S HOUSEHOLD	
		NAME		es in the	DATE	OF BIRTH	AGE	
		-1			- CATA			
	Datas and mso)	THUE GESO DHUS,		Consangun		DITION SHITH	HIIIAA I	
	nment service.	anob aut ut s /a	of any relautive	Mous sou o	Daw/I [			
DEFICE AND	IE OF AGENCY	ASSETS	, LIABILITIES	AND NETWO	RTH	SYLVETT A	700 00 00 00 00 00 00 00 00 00 00 00 00	
	(Including thos		and unmarried c ing in declarant's		v eighteen (	18) years of	ian to aman	
. ASSETS	3404		ng in aeciarani s	3 4 0	4		3404	
a. Real Prop	erties*							
		EXACT	ASSESSED	CURRENT	PAID			
DESCRIPTION	KIND	LOCATION	VALUE	MARKET ACQUISITION		ISITION	ACQUISITION COS	
(e.g. lot, house and lot condominium and	(e.g.residential, commercial, industrial,		(As found in the Tex Declaration of Real Property)					
improvements)	agricultural and mixed				YEAR	MODE		
NONE	HONE	HONE	NONE	HONE	HONE	HONE	NONE	
-970	owiedge, ine ap	1	arti or mar to the		i yar mi yi	of age livi		
limitle to vi	of consanguin	th civil degre	nt within four	se governme	tives in t	mes of rela	enumerated are neu	
	ntative to obtain		elters utuly and			Subtotal: P	tre velopaeld	
	Properties*						from all appropriate	
b. Personal	33401 - 113436 - 313110	THE RESTRICTION OF THE PARTY OF				ED halane	ACOUTETATION COST	
b. Personal	Manager - Street Comp	PTION		VE	and sond need		AMOUNT	
b. Personal	Manager - Street Comp	PTION A SAME THE	of age iiving w	L III SOMO D			THE MENTIONS OF STREET	
b. Personal	DESCRI	PTION HEART HAR		i in somo i	PARTITION DE		20.000.0	
b. Personal Angibles urniture and Ap	DESCRI	PTION A SAMELLE		g in somo i	2006	рен г ше В 202		
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ANGIBLES urniture and Ap lotorcyle amorder ndroid Cellphor	ppliances	E Ca		2	2006	Subtotal: P	50,000.0 10,000.0 80,000.0	
b. Personal	ppliances  e	E Pa	Government	2 2 2 3 3	2006	Subtotal: P ETS (a + b)	50,000.0 10,000.0 80,000.0 80,000.0	
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ANGIBLES urniture and Ap totorcyle amorder ndroid Cellphor	ppliances  *  NATU	E CA	Government	NAME	2006 2013 2016 OTAL ASS	Subtotal: P ETS (a + b)	50,000.0  10,000.0  80,000.0  80,000.0  OUTSTANDING BALANCE  2G0,000.0	
ANGIBLES urniture and Ap lotorcyle amorder ndroid Cellphor	ppliances  * NATU	E CA	Government	AGOMST	2006 2013 2016 OTAL ASS	Subtotal: P ETS (a + b)	50,000.0  10,000.0  80,000.0  80,000.0  OUTSTANDING BALANCE  2G0,000.0	

## **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. DATE OF NATURE OF BUSINESS NAME OF ENTITY/BUSINESS ACQUISITION OF **BUSINESS ADDRESS** INTEREST &/OR ENTERPRISE INTEREST OR FINANCIAL CONNECTION CONNECTION MIMNONE NONE NONE MONE HONGEWIFE ALIALLIMI 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 AGENCY/OFFICE AND RELATIONSHIP POSITION NAME OF RELATIVE **ADDRESS** NONE NONE NOHE NONE 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 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: JAN, 10 Cana (Signature of Co-Declarant/Spouse) (Signature of Declarant) Government Issued ID: DRIVERS LICENSED Government Issued ID: ID No. : ID No.: HO3-05-000 333 Date Issued: Date Issued: 2016 2 1 JAN 2022 SUBSCRIBED AND SWORN to before me this \_\_\_\_ 2021 affiant exhibiting to me the day of \_\_ above-stated government issued identification card. RYSAN C. GUINOCOR (Person Administering Oath)