## SWORN STATEMENT OF ASSETS, LIABILITIES AND NET WORTH As of Dec. 31, 20 18

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Tag methistal	Joint Filing	EUZ TO EF	Separate Filing		Not Applicable	iguavyt	
CLARANT:	(Family Name)	(First Name)	EUSON R.	_	POSITION:	PA	PINTER
	(raining realite)	(First Name)	(M. I.)	the secretary of the second	AGENCY/OFFICE OFFICE ADDRESS	-	
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	*/ A						
OUSE:	(Family Name)	(First Name)	(M. I.)	_	POSITION: AGENCY/OFFICE		Company of the second of the second
					OFFICE ADDRESS		especial and Associate that is being the old the control of the co
UNMARRI	ED CHILDREN	BELOW EIGHT	EEN (18) YEARS	OF AGE LIV	/ING IN DECLA	RANT'S H	OUSEHOLD
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ewa nomeos	xovidoa no m		s, LIABILITIES And unmarried chil			EVIT IN	NAME OF E
a. Real Propert	iles*	EXACT	ASSESSED	CURRENT FAIR	ACQUISITIO	ON	
e.g. lot, house and lot	(e.g.residential,	LOCATION	VALUE	MARKET VALUE			ACQUISITION CO
			(As found in the Tay	Declaration of	SECURIOR SEC	Name and Address of the Owner, where the Owner, which is the Owner, where the Owner, which is the Owner, where the Owner, which is the Owner, which i	
condominium and	commercial, industrial, agricultural and mixed		(As found in the Tax Real Prop		YEAR I	MODE	
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## 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	Toucho	A 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	~ 645
	31/20/10/10/10		
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## 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
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		7		a ivenificanting
		THE CHESTER OF	7	
vie u al mai ina	. On any	TERS AND Y	NOW VALUE	CAPOL DELLA ROLFELIZZA

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:			
(Signature of Declarant)	(Signature of Co-Declarant/Spouse)		
Government Issued 71N  ID No.: 708-186-768  Date Issued: 09-12-17	Government Issued ID No.: Date Issued:		
SUBSCRIBED AND SWORN to before me this above-stated government issued identification card.			
ACTION AND ACTION	(Person Administering Oath)		