

SWORN STATEMENT OF ASSETS, LIABILITIES AND NET WORTH

As of December 31, 2022
(Required by R.A. 6713)

Note: Husband and wife who are both public officials and employees may file the required statements jointly or separately.
☐ Joint Filing ☒ Separate Filing ☐ Not Applicable

DECLARANT:	Peñalosa	Marievic	F.	POSITION:	Instructor III
	(Family Name)	(First Name)	(M.I.)	AGENCY/OFFICE:	DTE
ADDRESS:	Paku, Bontoc,			OFFICE ADDRESS:	Visca, Baybay City, Leyte
	Southern				
	Leyte				
SPOUSE:	Peñalosa	Bert	C	POSITION:	Instructor IN
	(Family Name)	(First Name)	(M.I.)	AGENCY/OFFICE:	DTE
				OFFICE ADDRESS:	Visca, Baybay City, Leyte

UNMARRIED CHILDREN BELOW EIGHTEEN (18) YEARS OF AGE LIVING IN DECLARANT'S HOUSEHOLD

NAME	DATE OF BIRTH	AGE
N/A	N/A	N/A

ASSETS, LIABILITIES AND NETWORTH

(Including those of the spouse and unmarried children below eighteen (18) years of age living in declarant's household)

1. ASSETS

a. Real Properties*

DESCRIPTION (e.g. lot, house and lot, condominium and improvements)	KIND (e.g. residential, commercial, industrial, agricultural and mixed use)	EXACT LOCATION	ASSESSED VALUE	CURRENT FAIR MARKET VALUE	ACQUISITION		ACQUISITION COST
			(As found in the Tax Declaration of Real Property)		YEAR	MODE	
N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A

Subtotal: -

b. Personal Properties*

DESCRIPTION	YEAR ACQUIRED	ACQUISITION COST/AMOUNT
Personal (clothing, sandals and shoes etc.)	2022	50,000.00
Cellphone iPhone 6s	2022	15,000.00

Subtotal : 65,000.00

TOTAL ASSETS (a+b): 65,000.00

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

2. LIABILITIES*

NATURE	NAME OF CREDITORS	OUTSTANDING BALANCE
Medical Care	Private	15,000.00

TOTAL LIABILITIES: 15,000.00

NET WORTH : Total Assets less Total Liabilities = 50,000.00

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

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
Rosalinda P. Siega	Aunt	Teacher	Hipo Elementary School
Azalea Mae P. Siega	Cousin	Teacher	Javier Elementary School

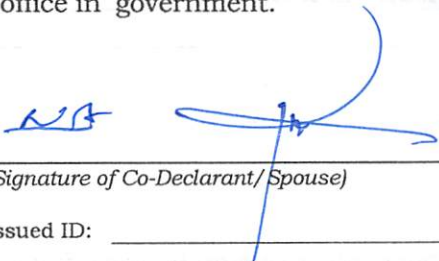
I hereby certify that these are true and correct statements of my assets, liabilities, net worth, business interests and financial connections, including those of my spouse and unmarried children below eighteen (18) years of age living in my household, and that to the best of my knowledge, the above-enumerated 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.

Date: March 24, 2023

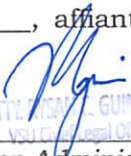

(Signature of Declarant)

Government Issued ID: UMID CARD
ID No.: CRN-021-1746-9844-4
Date Issued: May 2018


(Signature of Co-Declarant/Spouse)

Government Issued ID: _____
ID No.: _____
Date Issued: _____

SUBSCRIBED AND SWORN to before me this 14 day of April 2023, affiant exhibiting to me the above-stated government issued identification card.


ATTY. GENERAL GUINOCOR
YSU Legal Officer
(Person Administering Oath)