SWORN STATEMENT OF ASSETS, LIABILITIES AND NET WORTH

As of DECEMBER 31, 2022

(Required by R.A. 6713)

Note	e: Husband and	wife who d		als and employee Separate Fi	s may file the required ling			separately.
DECLARANT:	Dautil		Jane	P.	POSITION:	Instru	ictor -I	
(Family Na		me)	(First Name)	(M.I.)	AGENCY/OFFICE:	-	ge of Veterina	
ADDRESS:			Brgy. Conalum		OFFICE ADDRESS:			versity, Visca
	Inopacan		Leyte			Bayba	ay City Leyte	
SPOUSE:	NA	NA		NA	POSITION:			
	(Family Na	me) (Firs	(First Name)	(M.I.)	AGENCY/OFFICE:			
					OFFICE ADDRESS:			
UNMARRI	ED CHILDR	EN BELC NAME NA	OW EIGHTEEN	(18) YEARS (DF AGE LIVING I	N DEC		AGE NA
1. ASSETS a. Rea	(Inci		ose of the spous	e and unmarr	ID NETWORTH ied children belot ant's household)	w eighte	een (18)	
DESCRIPTION (e.g. lot, house and	KIND (e.g. residential		EXACT	ASSESSED	CURRENT FAIR	ACQU	ISITION	ACQUISITION
lot, condominium and improvements)	commercial, indus	trial,	LOCATION		MARKET VALUE the Tax Declaration of	YEAR	MODE	COST
	use)				al Property)			-v.A
NA	NA		NA	NA.	NA	NA	NA	NA
	-							
b. Person	nal Properties	s*					Subtotal:	
					1	^~		
		DESCRIP	HON		YEARA	CQUIRED		ACQUISITION COST/AMOUNT
Accordance					2	017		6,000.00
Accessories				2017		14,000.00		
Acer netbook Refrigerator					2017		18,000.00	
								3,500.00
Electrolux 2 burner gas stove Insular Life Wealth Secure				2017				
St. Peter Insurance					2017		100,000.00	
Accessories							55,500.00	
					2018		6,000.00	
Iphone 6s					2018		13,000.00	
Sony W61 Television			2018		17,000.00			
Accessories		-			-	019		6,000.00
Ring					17,000.00			
Axa					2	019		105,000.00

Subtotal: 401,000.00

34,000.00

6,000.00

2020

2022

Dell laptop

Accessories

TOTAL ASSETS	(a+b):	401,000.00
	(00.10).	102,000.00

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

2. LIABILITIES*

NATURE	NAME OF CREDITORS	OUTSTANDING BALANCE	
NA	NA	NA	

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	
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
N/A	N/A	N/A	N/A

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.

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fluit					
e of Declarant)	(Signature of	(Signature of Co-Declarant/Spouse)			
	Government Issued ID: _ ID No.:				
9/23/2016	Date Issued:				
	28th day of March 2023,	affiant exhibiting to me the above-			
identification card.	ATTY RY AN C. GUIN	ficer			
	pof Declarant) FRC 0009109 9/23/2016 SWORN to before me this identification card.	(Signature of Government Issued ID: 1009109 ID No.: Date Issued: SWORN to before me this 28th day of March 2023, identification card.			

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