SWORN STATEMENTS OF ASSETS AND LIABILITIES AND NETWORTH DISCLOSURES OF BUSINESS INTERESTS AND FINANCIAL CONNECTIONS AND IDENTIFICATION OF RELATIVES IN THE GOVERNMENT SERVICE

As of December 31, 20 64 (Required by R.A.6713)

NAME	POGOSA	JIMMY O.	POSITION/INCOME SCIENCE ADE	(75,000 annum)
	SURNAME	FIRST NAME MI	OFFICE DEPARTMENT OF AGRICULTU	RAL ENGINEER
			OFFICE ADDRESS 164, VICA, BAYE	ay, leyte
ADRESS	SAN VICENTE, KILIN	1, BAYBAY, LEXTE		
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KIND:	LOCATION: YEA		PERTY :ASSESSED:FAIR :	***************************************
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				A CONTRACTOR OF THE REAL PROPERTY.
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1 1 1 1			TOTAL	
b. PI	ERSONAL AND O	THER PROPERTIES	TOTAL	
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37	TO TONE TO THE STATE OF	A Sell Don.	TOTAL	
NET WO	RTH (Total Assets	(1a+1b) - Total Liabilitie	\$(2)	

B. BUSIN S INTERESTS AND FINANCIAL ONNECTIONS

NAME : POSITION : RELATIONSHIP: NAME/ADDRESS OF OFFICE (Note: Please use additional forms if necessary) I hereby certify to the best of my knowledge and information, that these are true statements assets, liabilities, networth, business interests and financial connections, including those of my spous unmarried children below 18 years of age and names of my relatives in the government as of Decemb 19, as required by and in accordance with Republic Act 6713. I hereby authorize the Ombudsman or his duly authorized representative to obtain and securall appropriate government agencies, including the Bureau of Internal Revenue, such douments the show my assets, liabilities, networth, business interests and financial connections, to include those spouse and unmarried children below 18 years of age living with me in household covering previous to include the year I first assumed office in the government. Date FERRARY 16, 2005 Signature of Spouse TIN:	articulars:	with you in your household? [] Yes [] No. If yes, give
NAME : NAME OF FIRM: ADDRESS: Interest and/or :Financial Connection: Connection COMPANY : Financial Connection: Connection To the best of your knowledge, are you related within the fourth degree of consanguinity or of affine anyone working in the government? []Yes []No. If yes, give particulars: NAME : POSITION: RELATIONSHIP: NAME/ADDRESS OF OFFICE NAME : POSITION: RELATIONSHIP: NAME/ADDRESS OF OFFICE I hereby certify to the best of my knowledge and information, that these are true statements assets, liabilities, networth, business interests and financial connections, including those of my spousure and all appropriate government agencies, including the Bureau of Internal Revenue, such douments the show my assets, liabilities, networth, business interests and financial connections, to include those spouse and unmarried children below 18 years of age living with me in household covering previous to include the year I first assumed office in the government. Date FERDMANY 16, 20.5 Signature of Spouse TIN: Comm. Res. Cert. No. D4491549 Signature of Spouse TIN: Comm. Res. Cert. No. D4491549 Signature of Spouse TIN: Comm. Res. Cert. No. D4491549 Signature of Spouse TIN: Comm. Res. Cert. No. D4491549 Late Issued: JANUARY 11, 20.5	And the Adaptive	
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