SWORN STATEMENT OF ASSETS, LIABILITIES AND NET WORTH

As of <u>DECEMBER 31, 2022</u> (Required by R.A. 6713)

DECLARANT:		WI JUL	nt Filing 🔲 :	ana emplogees Separate Fili	may file the required ng 🔲 Not App			separately.
DECLARANT:				_			IN OTHER	IOTOP I
	LESIDAN (Family Nar		JAMES ROY (First Name)	(M.I.)	POSITION: AGENCY/OFFICE:			JCTOR I SU
ADDRESS:	BRGY. MARC	•	BAYBAY CITY,	LEYTE	AGENCY/OFFICE: OFFICE ADDRESS:			Y CITY, LEYTE
-								
SPOUSE:	LESIDAN	ſ	NOELA	S.	AGENCY/OFFICE: V		H ASSISTANT	
-	(Family Nar	ne)	(First Name)	(M.I.)			VSU	
		,			OFFICE ADDRESS:			AY CITY, LEYTE es March 31,2023
							one act expre	
UNMARRIE	ED CHILDR	EN BE	LOW EIGHTEEN (1	.8) YEARS C	F AGE LIVING	IN DEC	į.	HOUSEHOLD
	KYNO		LESIDAN	DI	ECEMBER 17, 2	022	1	MOS.
		N/A			N/A			N/A
		N/A			N/A			N/A
	N/A			N/A			N/A	
DESCRIPTION	Properties* KIND		hose of the spouse of years of age living	ng in declara	current fair		uisition	ACQUISITION
lot, condominium and improvements)	(e.g. residential, commercial, industria agricultural and mixe	strial,		(As found in	the Tax Declaration of	YEAR MODE	MODE	COST
and improvements,	use)			Re	al Property)	IEAR	HODE	
House	Residentie	ત્રી	Brgy. Marcos, Baybay City, Leyte			2020	Construct ed	300, 000
<u></u>				<u></u>	1		Subtotal:	300, 000.00
b. Persona	l Properties	*						
DESCRIPTION				YEAR ACQUIRED			ACQUISITION COST/AMOUNT	
FURNITURE (Bed, Cabinet) CLOTHING (Shirts/Dress, Shorts, Shoes etc.)				2022 2022		4,933.00		
							5,800.00	
CLOTHING	HOME ACCESSORIES				2022			5,000.00
		APPLIANCES (Refrigerator, Aircon, Electric Fan)						
HOME ACC		erator	, Aircon, Electric	; ranj	20	022	#1	28,200.00
HOME ACC	ES (Refrige		, Aircon, Electric	; ranj		022 -2022	<u>'1</u>	28,200.00 82,957.00
HOME ACC	ES (Refrige S (Motorcy	rcle)		; ranj	2021			
HOME ACC APPLIANCE VEHICLE/S	ES (Refrige S (Motorcy	rcle)		; ranj	2021	1-2022 022	Subtotal:	82,957.00
HOME ACC APPLIANCE VEHICLE/S	ES (Refrige S (Motorcy	rcle)		; ranj	2021	1-2022 022		82,957.00 4,500.00

LIABILITIES*

NATURE	NAME OF CREDITORS	OUTSTANDING BALANCI
MULTI-PURPOSE LOAN	GSIS	181,321.85
EMERGENCY LOAN	GSIS	18,591.44
FURNITURE (BED)	EMCOR INC.	19,063.00
MOTORCYCLE	DES MARKETING INC.	39,043.00
	TOTAL LIABILIT	TES: 258, 019,29

NET WORTH: Total Assets less Total Liabilities =

173, 370.71

BUSINESS INTERESTS AND FINANCIAL CONNECTIONS

(of 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
	<u> </u>		

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
ALVIN P. LESIDAN	BROTHER	SCHOOL HEAD	DEPED 9TH DISTRICT, BAYBAY, LEYTE
RIZA M. ANIMOS	AUNTIE	TEACHER III	DEPED SOGOD, SOUTHERN LEYTE
LOURDES B. LESIDAN	AUNTIE	BOOKKEEPER	BALAY ALUMNI, VSU, BAYBAY CITY, LEYTE
MENCIUS B. LESIDAN	COUSIN	SRA	NARC, VSU, VISCA, BAYBAY, LEYTE
VERONICO R. PADERES	UNCLE	ADMIN AIDE I	HELVMU, VISCA, BAYBAY, LEYTE
MAY GRANJAN C. LESIDAN	SISTER-IN-LAW	TEACHER II	DEPED 5TH DISTRICT, BAYBAY, LEYTE
EMMANUEL P. LESIDAN	BROTHER	LAB. TECH	DMet, VSU, VISCA, BAYBAY, LEYTE
JESSICA NIÑA P. LESIDAN	SISTER	ADMIN AIDE III	UNIV. REGISTRAR, VSU, BAYBAY, LEYTE
PORFERIO M. LESIDAN, III	COUSIN		NFA, BACOLOD CITY, NEGROS OCCIDENTAL

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: May 23	2023	L Jollan	p-
(5	Signature of Declarant)		f Co-Declarant/Spouse)
Government Issued I	ID: LTO License ID H12-13-000752	Government Issued ID:	Philhealth ID 13-202091322-7
Date Issued:	FEB. 07, 2019	Date Issued:	NOV. 20, 2021
SUBSCRIBED agovernment issued is	AND SWORN to before me the dentification card.	2 9 MAY 2023 day of, affiant ex	xhibiting to me the above-stated

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