

☐ Separate Filing

☐ Joint Filing

	(Required by R.A. 6/13)
Note: Husband and wife who are both public of	officials and employees may file the required statements wintly or concrete

☐ Not Applicable

DECLARANT:	TSMEL Z	ANDRO G	ALGO		POSITION		ANIDO ME LANTINA
	(Family Name)	(First Name) (M	1. i.)	_	POSITION: AGENCY/OF	13.	LANDSCAPE FOREMA
							V
ADDRESS	BNOY, PATAG BARBAY CITY, LEYTE				OFFICE ADI	DRESS:	VSU, VISCA BAYRA
			0117/100710	_			CITY, LEYTE
SPOUSE:	FERLYANDEZ MAMPE LATTLAS				POSITION:		HOUSEWIFB
	(Family Name)	(Family Name) (First Name) (M. I.)			AGENCY/OF	FICE:	1,00000000
					OFFICE ADD	-	
IINMAD	DIED CHII DDEN	DEL OW STATE					
OHIMI	RIED CHILDREN		EEN (18) YEAR	S OF AGE L			NT'S HOUSEHOLD
	NAME VELLY JOE PER-NAUDEZ ISRAEL					F BIRTH	*****
		PERLNAUDE:	2 ISRAEL	- 15	MARCH	6,200	12
				_			
		ACCEMO				,,	
	(Including those	e of the spouse	S, LIABILITIES A and unmarried c	hildren helou	RTH -	21	
1 4665550		age livi	ing in declarant's	household)	eignteen (18	s) years (of
1. ASSETS				/			
a. Real Prop	erties*						
DESCRIPTION	WIND		ASSESSED	CURRENT			
DESCRIPTION	KIND	LOCATION	VALUE	FAIR MARKET	ACQUISITION		
(e.g. lot, house and lot	(e.g.residential,	-	(As found in the Tax	VALUE			ACQUISITION COST
unprovements)	commercial, industrial, agricultural and mixed		Real Prop	Declaration of erty)	YEAR	MODE	
NONE							
NONE							
1							
				l late			
b. Personal P	roperties*					ubtotal: I	
	•						
DESCRIPTION				YEAR ACQUIRED			ACQUISITION COST/ AMOUNT
	TELEVISION						11,000
MOTORCYCLE						-	73,000
128F12EGE12ATON							1 .
CABINET							10,000
	**			1.0			15,000
					Sı	ıbtotal: I	94,000 -
				то	TAL ASSET		
LIABILITIES*	*				TILL HOOE!	S (a + b)	94,00
NATURE				NAME OF CREDITORS			OUTSTANDING
A 62 1				-			BALANCE
NONF				13.			
		ggaran			TOTAL LIAB		
		NE	TWORTH : Tota	al Assets Les	ss Total Liab	ilities =	94,000
ditional sheet/s may be	e used, if necessary.						1111-

BUSINESS INTERESTS AND FINANCIAL CONNECTIONS

(of Declarant/ Declarant's spouse/ Unmarried Children Below Eighteen(18) years of Age Li ang in Declarant Household) I/We do not have any business interest or financial connection. DATE OF NATURE OF BUSINESS NAME OF ENTITY/BUSINESS ACQUISITION OF **BUSINESS ADDRESS** INTEREST &/OR ENTERPRISE INTEREST OR FINANCIAL CONNECTION CONNECTION 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 AGENCY/OFFICE AND NAME OF RELATIVE RELATIONSHIP POSITION ADDRESS 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 aboveenumerated 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. Government Issued ID: Drivers License Government Issued ID: ID No. : HO3-93-018912 ID No. : Date Issued: Date Issued: SUBSCRIBED AND SWORN to before me this day of 2018, affiant exhibiting to me the above-stated government issued identification card.

> ATTY. RYSAN C. GUINOCOR (Person Administering Oath)