SWORN STATEMENT OF ASSETS, LIABILITIES AND NET WORTH

As of May 31, 2022

(Required by R.A. 6713)

Note: H	usband and wife Joint Filing	who are both public	officials and employ Separate Filing	ees may file th			intly or separately.
	ar 1878), lie	Makin		9200000	Not Applicable		49_2470(7175 - 977
ECLARANT:	(Family Name)	Malvin (First Name)	(M. I.)		POSITION: AGENCY/OFF	_	epartment of Horticulture
					OFFICE ADDR		epartment of Horticulture,
DDRESS	Liloan, Orn	noc City			area		/SU, ViSCA, Baybay City
				-		_	
POUSE:	N/A				POSITION:		N/A
	(Family Name)	(First Name)	(M. I.)		AGENCY/OFF		N/A
					OFFICE ADDR	RESS:	N/A
UNMAR	RIED CHILDR	EN BELOW EIGH	TEEN (18) YEARS	OF AGE LI	VING IN DEC	CLARAN'	T'S HOUSEHOLD
		NAME			DATE O	AGE	
		N/A			N	/A	N/A
				and the second			
. ASSETS	(Including th	ose of the spouse of	rs, LIABILITIES A and unmarried child ng in declarant's ha	dren below ei		ears of a	ge
a. Real Prope	erties*			CURRENT			
DESCRIPTION	KIND	EXACT LOCATION	ASSESSED VALUE	FAIR MARKET VALUE	FAIR ACQUISITION		ACQUISITION COST
(e.g. lot, house and lot condominium and improvements)	(e.g.residential, commercial, indust agricultural and m	trial,	(As found in the Tax Real Prop		YEAR	MODE	
N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
*	2 1/m			tel tate; fara attend			
						Subtotal:	PN/A
b. Personal F	Properties*						
	DES	CRIPTION		Y	EAR ACQUIR	ED	ACQUISITION COST/
sus ROG Strix C	L 503 Laptop			TO BE GOOD	2018		48,000.00
Xiaomi Black shark 4 Phone				2022			23,000.00
Honda XR 150L N	Motorcycle				2021		65,000.00
			_1				
2. LIABILITIES	ŵ				TOTAL ASS	Subtotal: ETS (a +	
		ATURE		NAM	E OF CREDIT	rors	OUTSTANDING
Personal Loan				Maria Cecil	ia Camarque	z	BALANCE 5,000.00
				-			
					TOTAL LIA	BII ITIE	S: 5,000.00

^{*}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 Household)

 \square 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
none	none	none	none

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 RELATIVE	RELATIONSHIP	POSITION	NAME OF AGENCY/OFFICE AND ADDRESS
none	none	none	none

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 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.

Date: 5/3	1/22				
			p/A		
(Signature of Declarant)			(Signature of Co-Declarant/Spouse)		
Government Issued	LTO license	- 1 500	Government Issued		
ID No.:	H-12-19-000261	17 (1937)	ID No.:		
Date Issued:	Feb-18	100 March 20	Date Issued:		
	AND SWORN to before			me the	