SWORN STATEMENT OF ASSETS, LIABILITIES AND NET WORTH As of Dec. 31, 2023

(Required by R.A. 6713)

		☐ Joint Filing	□ Separ	ate Filing 🖵 Not Applicable	
DECLARANT:	PADERES	VERONICO	R.	POSITION:	Administrative Aide I
	(Family Name)	(First Name)	(M.I.)	AY	THE STATE OF THE S
				AGENCY/OFFICE:	VSU
ADDRESS:	Brgy. Marcos, Bayl	bay City		OFFICE ADDRESS:	Visca, Baybay City, Leyte
	William				
SPOUSE:	PADERES	MA. CORAZON	В.	POSITION:	HOUSE WIFE
	(Family Name)	(First Name)	(M.I.)	AGENCY/OFFICE:	N/A
				OFFICE ADDRESS:	N/A
					N/A
					10/11
	UNMARRIED CHI	LDREN BELOW EIGHTE	CEN (18) YEAR	s of age living in dec	JAMES ROY LESIDAN
		ME	CEN (18) YEAR	s of age living in dec date of birth	JAMES ROY LESIDAN
	NA V	ME	CEN (18) YEAR	DATE OF BIRTH	LARANT'S HOUSEHOLD
afriow 4:	NA V	me /A /A	CEN (18) YEAR	DATE OF BIRTH	LARANT'S HOUSEHOLD AGE N/A

DESCRIPTION (e.g. lot, house	KIND (e.g. residential,	EXACT	ASSESSED VALUE	CURRENT FAIR MARKET VALUE	ACQ	UISITION	ACQUISITION COST
and lot, condominium and improvements)	commercial, industrial, agricultural and mixed use)			the Tax Declaration of 1 Property)	YEAR	MODE	
HOUSE & LOT	RESIDENTIAL	Brgy. Marcos, Baybay City		102,000.00	1993	Purchase	102,.000.00
N/A	N/A	N/A	N/A	N/A	NIA	1V/A	N/A

Subtotal: 102,000.00

248,600.00

b. Personal Properties*

DESCRIPTION	YEAR ACQUIRED	ACQUISITION COST/AMOUNT
Furniture set	2019-2023	27,000.00
Appliances ACTIC YAM	2008-2023	52,600.00
Motorcycle	2009	67,000.00
	Subtotal:	146,600.00

2. LIABILITIES*

NATURE	NAME OF CREDITORS	OUTSTANDING BALANCE
MPL	PAG-IBIG	5,529.68
EMERGENCY LOAN	GSIS	14,422.32
COMPUTER LOAN	GSIS	5,899.98
N/A	N/A	N/A

TOTAL LIABILITIES: 25,851.98

TOTAL ASSETS (a+b):

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
N/A	N/A	N/A	N/A
N/A	N/A	N/A	NA

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
JAMES ROY LESIDAN	NEPHEW	INSTRUCTOR	vsu
ALVIN LESIDAN	NEPHEW	TEACHER	DEPED
N/K	h1/10	1)/1	h 1 / h
10/11	10/17	10/H	10/1+

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.

D4-19-721

(Signa	ture of Declarant)	(Signature of Co-	Octorial (Spouse)
Government Issued ID: ID No.: Date Issued:	LICENSE H12-10-000211 10-10-2018		NIOR CITIZEN 19-003/3 7-31-20/9
		2 4 MAY 0004	
SUBSCRIBED AN overnment issued idea	TD SWORN to before me the ntification card.	ais $\frac{3}{2}$ day of $\frac{2024}{2}$, affiant exhibition	oiting to me the above-state