## SWORN STATEMENT OF ASSETS, LIABILITIES AND NET WORTH

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

Note: Husband and wife who are both public officials and employees may file the required statements jointly or separately.

Note	: Husband a		Joint Filing $\Box$	Separate Fili	ng 🗖 Not Ap	plicable		
			•	0	POSITION:	Dows	: T	
DECLARANT: LI		A DATE OF THE PROPERTY OF THE		AGENCY/OFFICE:		PROF TO		
	(Family N		(First Name)	1	OFFICE ADDRESS:	NOR		VISCA
ADDRESS:	CITY	16 Li	VCU VISCA 12	11010		BMI	dry cit	y Leute
						 †_ 4	A	
SPOUSE:		NA_	LUCENA	· <del>A</del>	POSITION: AGENCY/OFFICE:	DEPE	D BAN	BKB NAS
	(Family N	(ame)	(First Name)		OFFICE ADDRESS:	30 D	t Ptci	
						<b>EAM</b>	by cit	N IFUTE
			ı					
UNMARRI	ED CHILI	DREN E	BELOW EIGHTEEN (	18) YEARS O	F AGE LIVING I	N DECL	ARANT'E	HOUSEHOLD
			ME		DATE OF BIRTH		[1	AGE
	NA	IV.			NA			IA
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			ASSETS, LIA	BILITIES AN	D NETWORTH		ĺ	
	l	Includii	ng those of the spous	e and unmarr	ied children belot	v eighte	en (18)	
			years of age li	iving in declar	ant's household)			
1. ASSETS								
a. Rea	l Propert	les*						•
	454044400							
DESCRIPTION	14 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -		EXACT	ASSESSED	CURRENT FAIR	ACQU	KOITIBI	ACQUISITION
leig lot, house and lot, condominium	commercial	industrial.	LOCATION	VALUE	MARKET VALUE	1000	20.6	COST
and improvements	egricultural i	and fnixed		, (AS IOUILA III Re	al Property)	YEAR	MODE	
			•	:				
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1						S	Subtotal:	
D. Perso	nal Prope	rties*						
		DES	CRIPTION	Carrier St.	YEAR	CQUIRED		ACQUISITION
450 35		i sa div	A Taran					COST/AMOUNT
CUSTHI	UC / JEV	NEUR	IEC	e consequent (All offices) for the eller (All All All All All All All All All Al	2000 - 2	022	- 40	Art and a second second
		50,00		m)		010		50,000.00
	KYNHO		AR.	<u>, , , , , , , , , , , , , , , , , , , </u>	2016	~10		64, 500-00
	3, 000		HAMDHELD PAPIL	C40, 880)		2 22.0		245, 500, 50
	<del>-71 / 6 4 /</del>	<u> </u>	THE PROPERTY OF THE PROPERTY O	<u> </u>	, ,,,,,,		bubtotal:	63,000.00
						•	mootal:	422, 500.60
					<b>ጥ</b> ርንጥ	at. Agge	TS farkle	422,000.00
Additional	sheet/s m	ay be u	sed, if necessary.		201		-~ (a.b);	TAV, 000.00
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Page 1 of \_\_\_

## 2. LIABILITIES\*

NATURE	NAME OF CREDITORS	OUTSTANDING BALANCE	
VSUCC LOM	VSUCC VSU VISCA COOP	335,000-00	
GSIS LOWN	COSIS MATASIN	200,000,00	
GFAI	GSIS MAASIN	500,000.00	

TOTAL LIABILITIES: 035, 000-00

**NET WORTH: Total Assets less Total Liabilities** 

\* 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'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	
ИД	NA	NA	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
NA	NA	NA	NA	
		L		

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 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

nousehold covering previous years to include the year	I first assumed office in government.
Date: MARCH 3 2023  DARIO PILINA  (Signature of Declarant)	NOTIA A. LINA H (Signature of Co-Declarant/Spouse)
Government Issued ID:	Government Issued ID: DEFD 1D ID No.: 566 2329
<b>SUBSCRIBED AND SWORN</b> to before me thisgovernment issued identification card.	day ofaffiant, exhibiting to me the above-stated ATTY. EDEN 8. HAVEZ-BUTAWAN Notary Public for the Province of Leyte, City of Baybay

Notarial Commission No. B-22-06-06

(Person Administering Oath) ... 3, 2023

IBP No. O. R. No. 057239 issued on Jan. 2, 2023 OMPLIANCE NO. VII-0008593-Valid until April 14, 2025 Attorney's Roll No. 42391

TIN No. 207-628-029 R. Magsavsay Avenue, Baybay City, Leyte

DOC. NO. Page No. Series of 20 23