

(Required by R.A.6713)

	PUIM CO RNAME	FIRST NAM	1E MI		DEPT. of PLANT BREEDING & GENETICS		
ADRESS #A	CRUER'S U	ILLAGE VIS	CA, BAYBAY CITY, U	OFFICE ADDF	RESS / <u>V</u>	SCA, BAYBAY CITY	CF415
SPOUSE NAM		URNAME	NIMFA FIRST NAME	POSITION OFFICE	pore		
Unmarried chi	ldren belov	w 18 years o	f age				
	NAM	IE	DATE OF BIRTH				
VAY L.	QUI	Me			SEPT.	17, 2003	
DALE L		MED			APML 10, 2006 FEB. 24, 2010		
MAPK PO	DNN C.	QUIMCI)		HB.	29, 2010	
		Α.	. ASSETS, LIABILIT	TES AND NET	WORTH		
1. ASSETS a. Real Prope	rties						
KIND LO	CATION	YEAR	MODE OF ACQUISI- TION	ASSESSED VALUE	CURRENT FAIR MARKET VALUE	ACQUISITION CO LAND BLDG ETC.	IMPROVE- MENTS
nne				:			
				TOTAL			
b. PERSONA	L AND OT	HER PROPI	TOTAL ROPERTIES				
				0111050	: ACCUMENTAGE TO COST		
MOTORCY CLE			YEAR AC		ACQUISITION COST 48, N.O		
TELE VISION			2012			13, M.N	
						y Yann (V)	Month Pri
c. LIABILITIE	S (loans, r	nortgages, e	tc.)	TOTAL			
NATURE			NAME OF C	DEDITORS	AMOUNT		
Galory Loan			G515	LEDITORS	(6, on a		
Galary Lan			PAG-11	B169	13, on. a		
Regular Loan			disc	CÒ.	19, ON. N		
NETWORTH	(Total Ass		- Total Liabilities (2)	TOTAL		88, ON. N	103

B. BUSINESS INTERESTS AND FINANCIAL CONNECTIONS Do you have any business interests and other financial connections including those of your spouse and unmarried children below 18 years of age living with you in your household? [] Yes [] No. If yes, give particulars: Nature of Business Date of NAME NAME OF FIRM ADDRESS Interest and/or Acquisition/ COMPANY Financial Connection Connection na C. IDENTIFICATION OF RELATIVES IN THE GOVERNMENT SERVICE To the best of your knowledge, are you related within the fourth degree of consanguinity or of affinity to anyone working in the government? []Yes []No. If yes, give particulars: NAME POSITION NAME/ADDRESS OF OFFICE (Note: Please use additional forms if necessary) I hereby certify to the best of my knowledge and information, that these are true statements of my assets, liabilities, networth, business interests and financial connections, including those of my spouse and unmarried children below 18 years of age and names of my relatives in the government as of ______ as required by and in accordance with Republic Act 6713. I hereby authorize the Ombudsman or his duly authorized representative to obtain and secure from all appropriate government agences including the Bureau of Internal Revenue, such documents that may show my assets, liabilities, networth, business interests and financial connections, to include those of my spouse and unmarried children below 18 years of age living with me in household covering previous years to include the year I first assumed office in the government. Date Signature of Spouse Signature TIN: TIN: Comm. Res. Cert. No. Comm. Res. Cert. No. Issued at: Issued at: Date Issued: Date Issued: SUBSCRIBED AND SWORN TO before me this exhibiting his/her Residence Tax Certificate as indicated above.

Person Administering Oath