SWORN STATEMENT OF ASSETS, LIABILITIES AND NET WORTH

As of December 31, 2021

(Required by R.A. 6713)

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

| | Joint Filing | | Separate Filing | Ø | Not Applicab | le | |
|---|---|---------------|--|---|--------------------|------------------------|---|
| DECLARANT: | Prado, | Louis | P. | | POSITION: | Adn | ninistrative Assistant II |
| | (Family Name) | (First Name) | (M. I.) | - | AGENCY/OFFIC | | yas State University |
| | | | | | OFFICE ADDRE | | , Baybay City, Leyte |
| ADDRESS | Claro M.Rect | o Street | | _ | · | | |
| | Baybay City, Leyte | В | | - | | | |
| SPOUSE: | Prado, | Gretchen | Mae M. | | POSITION: | Lab | oratory Technician (J.O) |
| | (Family Name) | (First Name) | (M. I.) | = | AGENCY/OFFIC | | yas State University |
| | | | | | OFFICE ADDRE | 88: VSU | , Baybay City, Leyte |
| | /F\$ 4 | | | | | | |
| UNMARR | HED CHILDREN | BELOW EIGHT | een (18) year: | S OF AGE L | VING IN DEC | LARANT | 's household |
| | | NAME | | | date of i | BIRTH | AGE |
| | | | | | | | |
| | Louigie M. Prado | | | _ | February 25, 20 | 007 | 14 yrs. Old |
| | Kate Marie M. Prado | | | - | December 2, 20 | 800 | 13 yrs. Old |
| | Kathleen Mae M. P | rado | | - | December 2, 20 | | 13 yrs. Old |
| Kris Anne M. Prado | | | - | December 2, 20 | | 13 yrs. Old | |
| | Kristine M. Prado | | | - | September 12, | | 9yrs. Old |
| | Lourenz M. Prado | ASSTATI | , liabilities | A RYD - MID-MITC | November 25, 2 | 2017 | 4 yrs. Old |
| a. Real Prop | erties* | | | | | | |
| DESCRIPTION | RIND BRACT ASSESSED LOCATION VALUE | | CURRENT PAIR MARKET VALUE CURRENT ACQUISITION | | ACQUISITION COST - | | |
| (a.g. lat, house and lat continuent and | je g residentist. remainistist linkuurist. | | (he found to the Tax Real Prop | Destaurtion of | YBAR | MODE | |
| himmought | sections and aired | | and the second s | | 13.13 | | |
| | | | | | | | |
| None | u* 15 | L | | <u> </u> | LL_ | | <u> </u> |
| b. Personal i | Properties* DESCRIP | TION | | | Sub AR ACQUIRED | total: P | ACQUISITION COST/ |
| 1 Unit Motorcycle (Yamalia Crypton 105) | | | 2001 | | | 58,000.00 | |
| 1 Unit Refrigerator (GE) | | | 2014 | | | 13,000.00 | |
| 1 Unit Flat TV (| | | 2018 | | | 15,000,00 | |
| 1 Unit Motorcycle Kawasaki Fury 125 (Second Hand) | | | 2019 | | | 15,000.00 | |
| 1 Unit Motorcycle | Kawasaki Fury 1 | 25 (Second Ha | nd) | | 2019 | | ļ |
| 1 Unit Motorcycle | e Kawasaki Fury 1 | 25 (Second Ha | nd) | | | total. P | 25,000.00 |
| 1 Unit Motorcycle | e Kawasaki Fury 1 | 25 (Second Ha | nd) | т | | total: P 3 (a + b): | ļ |
| 1 Unit Motorcycle 2. LIABILITIES | 27 q 11 \$ | 25 (Second Ha | nd) | т | Sul | | 25,000.00 111,000.00 |
| | 27 q 11 \$ | | nd) | le sa esta de la companya de la comp | Sul | 3 (a + b): | 25,000.00 111,000.00 111,000.00 OUTSTANDING |
| 2. LIABILITIES | *** | | nd) | WAMI | Sub OTAL ASSETS | 3 (a + b): | 25,000.00 111,000.00 111,000.00 OUTSTANDING BALANCE |
| | *** | | ndj | le sa esta de la companya de la comp | Sub OTAL ASSETS | 3 (a + b): | 25,000.00 111,000.00 111,000.00 OUTSTANDING |
| 2. LIABILITIES | *** | | nd) | WAMI | Sub OTAL ASSETS | 3 (a + b): | 25,000.00 111,000.00 111,000.00 OUTSTANDING BALANCE |
| 2. LIABILITIES | *** | | ndj | WAMI | Sub OTAL ASSETS | 3 (a + b): | 25,000.00 111,000.00 111,000.00 OUTSTANDING BALANCE |

BUSINESS INTERESTS AND FINANCIAL CONNECTIONS

(of Declarant/ Declarant's spouse/ Unmarried Children Below Eighteen(18) years of Age Living in Declarant Household)

[] If 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 |
|---------------------------------------|------------------|---|--|
| Not Applicable | Section | | |
| | | | |
| | 316.21 | 93.9 7 | |

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 relavtive/s in the government service.

| NAME OF RELATIVE | RELATIONSHIP | POSITION | NAME OF AGENCY/OFFICE AND ADDRESS | | |
|------------------|-------------------|----------|--|--|--|
| Not Applicable | | | | | |
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| 105. | BYSION OF BY | | 2523 - 17300 | | |
| | sampo elan nakaya | | Mark Commence of the Commence | | |

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: April 27, 2022 | |
|--|---|
| (Signature of Declarant) | (Signature of Co-Declarant/Spouse) |
| Government Issued ID: VSU ID ID No.: V00422 Date Issued: January, 2013 SUBSCRIBED AND SWORN to before me this above-stated government issued identification card. | Government Issued ID: ID No.: Date Issued: 2 8 APR 2022 day of 2022, affiant exhibiting to me the |
| | ATTY. RYSAN O. GUINOCOR |
| | Atterney IV (Person Administering Oath) |