SWORN STATEMENT OF ASSETS, LIABILITIES AND NET WORTH As of (Required by R.A. 6713)

	sband and wife wh Joint Filing	b are boin public o	Separate Filing	gees mag jue tr	Not Appl		uy or separatety.	
ECLARANT:	(Family Name) (First Name) (M. I.)			enndal et -	POSITION: _/		MIN AIDE IV	
DDRESS	Brusy. Pani	6 ASUGAN	BAUBAU CUT	y silon	OFFICE ADDRESS:		CITY, LEYTE	
PUSE: PAHTVA VIA		(First Name)	ZEL, M. (M. I.)	-	POSITION: AGENCY/OFFICE: OFFICE ADDRESS:		KOMIN MDE II SPPMO - VEU SCA, BAUBAU CUT	
UNMARR	RIED CHILDREN	BELOW EIGHT	EEN (18) YEARS	S OF AGE LI	VING IN D	ECLARANT	S HOUSEHOLD	
	XAMER WHEL M. PLAMENTE XAMER WHEL M. PLAMENTE			OD SHT ME		07, 2017	The state of the s	
ASSETS a. Real Prope	e la lega de la companya de la compa	se of the spouse	s, LIABILITIES A and unmarried cl ng in declarant's	hildren below		18) years of		
DESCRIPTION	KIND	EXACT LOCATION	ASSESSED VALUE	FAIR MARKET VALUE	ACQUISITION YEAR MODE		ACQUISITION COST	
(e.g. lot, house and lot condominium and improvements)	(e.g.residential, commercial, industrial, agricultural and mixed		(As found in the Tax Real Prop					
toncc	NOSIBERTIAL	PANGAMBAN, BANGAY CITY LEYTE	50, ov	120, m	2016	CASH	80,0W	
	shiitles; net won	I my assels, Th	o anomolate Islamana o	r and correct	מרפ נרענ	Subtotal: P	80, on	
b. Personal P	roperties*	TION	red all of fud	VI	AR ACQUI	ar gar al o	ACQUISITION COST	
APPLIANCES				2018			AMOUNT 40,000	
LAPTOP				2021			57,000	
CELIPHONE				a seemsaa 2020 m saithida			ev m	
Mitor CYAE				2020			170, W	
				Subtotal: P TOTAL ASSETS (a + b):			300,000	
LIABILITIES*	Laurense	Condition Local Declaration	onimano[2]	•	OTAL AG	3213 (a + b)	1 To anniconie	
NATURE				NAME OF CREDITORS			OUTSTANDING BALANCE	
LO			No.:	V	811 400		250, m	
	2.8	00	ate Issued		TOTAL LI	ABILITIES:	250 W	
					IOIAL DI	UDITITIES.		

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. DATE OF NATURE OF BUSINESS NAME OF ENTITY/BUSINESS ACQUISITION OF **BUSINESS ADDRESS** INTEREST &/OR ENTERPRISE INTEREST OR FINANCIAL CONNECTION 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 AGENCY/OFFICE AND NAME OF RELATIVE RELATIONSHIP POSITION **ADDRESS** AA IV PIAMOME SUPPLY OFFICE EDITO 6. FATHER Ven-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 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. (Signature of Declarant) (Signature of Co-Declarant/Spouse) Government Issued Government Issued ID No.: ID No.: Date Issued: Date Issued: SUBSCRIBED AND SWORN to before me this affiant exhibiting to me the above-stated government issued identification card.

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N C. GUINOCOR

VSU Office Legal Officer
(Person Administering Oath)