SWORN STATEMENT OF ASSETS, LIABILITIES AND NET WORTH

		As of					
			(Required by R.A. 6	5713)			
Note		e who are both public ofj Joint Filing	ficials and employee □ Separate Fi				r separately.
DECLARANT:				POSITION:			
ADDRESS:	(Family Name)	(First Name)	(M.I.)	AGENCY/OFFICE: OFFICE ADDRESS:			
CDOLLEE.				DOCUMION.			
SPOUSE:	(Family Name)	(First Name)	(M.I.)	POSITION: AGENCY/OFFICE: OFFICE ADDRESS:			
UNMARRI		BELOW EIGHTEE	N (18) YEARS (OF AGE LIVING		LARANT'	S HOUSEHOLD
1. ASSETS a. Real	(Includi	ng those of the spo	use and unmarr	ID NETWORTH ied children belo rant's household;		een (18)	
DESCRIPTION (e.g. lot, house and lot, condominium and improvements)	(e.g. residential, commercial, industrial, agricultural and mixed	EXACT LOCATION		CURRENT FAIR MARKET VALUE the Tax Declaration of	ACQUISITION YEAR MODE		ACQUISITION COST
,	use)		Re	eal Property)	12111	11.022	
h Persor	nal Properties*					Subtotal:	
D. Telsoi	DE					ACQUISITION COST/AMOUNT	
						Subtotal :	
				ፐ Ωፕ	'AT. ASS	ETS (a+b):	
				101	UD UOO	יות (מ⊥ח):	

^{*} Additional sheet/s may be used, if necessary.

. LIABILITIES*							
NATURE		OUTSTANDING BALANCE					
			Te	OTAL LIABILITIE	 ES:		
	NET	WORTH : Total		s Total Liabilitie			
Additional sheet/s may be	y used, if neces	saru					
Traditional oncoy o may be	racea, y racea.	sarg.					
(of Declarant / Declara				CONNECTIONS	Declarant's Household)		
· -	_			financial connecti	•		
	ADDRESS NATURE OF BUSINESS			DATE OF ACQUISITION OF			
NAME OF ENTITY/BUSINESS BUSIN ENTERPRISE		ADDRESS	INTEREST 8	%/OR FINANCIAL	INTEREST OR CONNECTION		
			CON	NECTION			
	DEI ATI	VES IN THE G	OVEDNMEN'	r sedvice			
(Withi	<u></u>			le also Bilas, Balae ar	nd Inso)		
	I I/We do not k	now of any rela	ative/s in the	government servi	ce)		
NAME OF RELATIVE RELAT		ONSHIP	POSITION	NAME OF AGEN	ICY/OFFICE AND ADDRESS		
	=			=	s, liabilities, net worth,		
business interests and f eighteen (18) years of a			_	· -			
enumerated are names of				•			
affinity.	<i>J</i> =				g and an end gar ag		
I hereby auth	orize the Oml	oudeman or t	uis/her duly	authorized repre	sentative to obtain and		
secure from all approp			-	=			
documents that may sho	•		_				
to include those of my	spouse and	unmarried ch	ildren below	18 years of age	living with me in my		
household covering previ	ous years to in	clude the year	I first assum	ed office in gove	rnment.		
Data							
Date:		_					
(Signature	of Declarant)			(Signature of Co-De	eclarant/Spouse)		
Government Issued ID:				ent Issued ID:			
ID No.: Date Issued:		ID No.: Date Issued:					
SUBSCRIBED AND S	WORN to befo	re me this	dav of	, affiant exhibi	iting to me the above-stated		
government issued identifie					5		

(Person Administering Oath)