SWORN STATEMENT OF ASSETS, LIABILITIES AND NET WORTH

As of <u>December 31, 2021</u> (Required by R.A. 6713)

Note	e: Husband and wife t	vho are both public offic Joint Filing	ials and employed Separate F				or separately.	
DECLARANT:	BALDONADO (Family Name)	CHRISTIAN VIE	Р.	POSITION:		INS	TRUCTOR	
ADDRESS:	BRGY. COMBIS DULAG, LEYTE	(First Name)	(M.I.)				STATE UNIVERSITY BAY CITY, LEYTE	
POUSE:	BALDONADO (Family Name)			POSITION: AGENCY/OFFICE:	V	NURSE (JOB ORDER) VISAYAS STATE UNIVERSITY		
			(M.I.)	OFFICE ADDRESS		HO ISAYAS ST	OSPITAL ATE UNIVERSITY	
							BAYBAY CITY, LEYTE	
UNMARRI	ED CHILDREN BI	ELOW EIGHTEEN	(18) YEARS (OF AGE LIVING	IN DEC	LARANT	'S HOUSEHOL	
NAME YURIEL JAESMIN G. BALDONADO			unide op an	DATE OF BIRTH APRIL 13, 2013		AGE 8		
a. Real	Properties*	EXACT	ASSESSED	CURRENT FAIR	ACOU	ISITION	ACQUISITION	
e.g. lot, house and lot, condominium and improvements)	(c.g. residential, commercial, industrial, agricultural and mixed	LOCATION	VALUE	MARKET VALUE			COST	
NONE	usc) NA	NA NA	Re	al Property)	YEAR	MODE		
NONE	NA	NA	NA	NA	NA	NA		
				1	Į.		NA	
							NA	
b. Persona	al Properties*				S	ubtotal:		
b. Persona		MPTION		YEAR A	S	ubtotal:		
ERSONAL	DESCR	EPTION		YEAR A		ubtotal:	NA ACQUISITION	
b. Persona PERSONAL APTOP PRINTER	DESCR	EPTION				ubtotal:	NA ACQUISITION COST/AMOUNT	

2019

HOUSE REPAIR

Subtotal: 162,000.00

60,000.00

2. LIABILITIES*

NATURE	NAME OF CREDITORS	OUTSTANDING BALANCE
LOAN	TEACHER-NEEDS-ASSISTANCE COOPERATIVE	20,000.00

TOTAL LIABILITIES: 20,000.00

, affiant exhibiting to me the above-stated

NET WORTH: Total Assets less Total Liabilities = 142,000.00

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
NA	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
NELMA P. BALDONADO	MOTHER	MASTER TEACHER I	JULITA NATIONAL HIGH SCHOOL
BERNARDITA P. VENEZUELA	AUNT	AGRICULTURIST II	PHILIPPINE COCONUT AUTHORITY VIII
DANIEL C. PADUANO	UNCLE	INSTRUCTOR	EVSU - DULAG CAMPUS
MANUEL C. PADUANO	UNCLE	GENRAL UTILITY WORKER	EVSU - DULAG CAMPUS
GERALDINE S. PADUANO-FABILA	FIRST COUSIN	BOARD SECRETARY	NATIONAL MARITIME POLYTECHNIC TACLOBAN

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 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 household covering previous years to include the year I first assumed office in government.

Date:Janua	ry 10, 2022			
	That			
(Signature of Declarant)		(Signature of Co-Declarant/Spouse)		
Government Issued ID:	PRC	Government Issued ID:		
ID No.:	075-1606	ID No.:		
Date Issued:	APRIL 4, 2012	Date Issued:		

day of

SUBSCRIBED AND SWORN to before me this

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