## SWORN STATEMENT OF ASSETS, LIABILITIES AND NET WORTH As of \_\_\_\_\_\_ Op \_\_\_\_\_ Tels. 17. 2014 (Required by R.A. 6713)

Note		who are both Joint Filing		and employees may Separate Filing		uired stateme Applicabl	ents jointly or separately. e	
DECLARANT:	BALLINA	+ 1	7 5 4	T pos	1 /		0 —	
DECLARANT.	(Family Name)	(First I	Name)		TION: NCY/OFFIC	E: Deat	· pry IV	
ADDRESS:	Bradalype, B	my bony, Loy be	,		ICE ADDRE	1091 10	Visson Bayboy, Lyte	
SPOUSE:	NA			POS	POSITION:		MA	
	(Family Name) (First Name)		Vame)		AGENCY/OFFICE: OFFICE ADDRESS:		1 " "	
			5					
UNMARRII	ED CHILDREN I	BELOW EIG	HTEEN (18	3) YEARS OF A	GE LIVIN	G IN DEC	LARANT'S HOUSEHOLD	
	N.A	AME		DA	TE OF BIRT	AGE		
45.05		3 2 5						
		References						
	(Includir	ng those of t	he spouse a	LITIES AND NE nd unmarried ci ng in declarant's	nildren be	low eighte	en (18)	
1. ASSETS a. Real	Properties*							
DESCRIPTION (e.g. lot, house and	KIND (e.g. residential,	LOCATION	ASSESSED	CURRENT FAIR	ACQ	UISITION	ACQUISITION COST	
lot, condominium and improvements)	commercial, industrial, agricultural and mixed use)	1440		MARKET VALUE the Tax Declaration of al Property)	YEAR	MODE		
b. Person	al Properties*					Subtota	:	
	DESCRIF	TION		YE	AR ACQUIRE	ED	ACQUISITION COST/AMOUNT	
Appliances				19	85-201	29,900		
I like mis	-			19	88-200	10,500		
Netbook					2012	15, m		
motoringer	<u>e</u>				2013		go, m	
						Subtotal:		
2. LIABILITI	ES*			TC	TAL ASSI	ETS (a+b):	75, 9W	
NATURE			NAME OF CR	EDITORS	OUTSTANDING BALANCE			
Regular Loan			LEU-CDC				11,981	
0		-1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1						
				7	OTAL LI	ABILITIES	S:	
							(1) 73)	
Additional sk	neet/s may he us			Total Assets les	s Total L	iabilities	= 63,419	

## 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	
		y- y- 3 3x2 121		

## RELATIVES IN THE GOVERNMENT SERVICE

(Within the Fourth Degree of Consanguinity or Affinity. Include also Bilas, Balae and Inso)  $\square$  I/We do not know of any relative/s in the government service)

RELATIONSHIP	POSITION	NAME OF AGENCY/OFFICE AND ADDRESS
sis fen	Stafe Andi In	WA, pril Navy, manife
pro the	Sania Fine Opice I	Fine Dept Buhann, Legh
AC DES		
mile	Colal persone lelle	to Accounting Oppice, MMDA, Morifo
	sis fen	Sisten State And In  Drother Sin Fin Opice I

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: Mo	nch 4, 2014			
	ofina J. Baline  Ignature of Declarant)	(Signature of Co-Declarant/Spouse)		
Government Issued II ID No.: Date Issued:		Government Issued ID: ID No.: Date Issued:	_	

SUBSCRIBED AND SWORN to before me this day of Mach, affiant exhibiting to me the above-stated government issued identification card.

(Person Administering Oath)