Revised as of January 2015 Per CSC Resolution No. 1500088 Promulgated on January 23, 2015

SWORN STATEMENT OF ASSETS, LIABILITIES AND NET WORTH As of __DECEMBER 2015_____

(Required	by	R.A.	6713
-----------	----	------	------

	,		(Required by	R.A. 6713)			
Note: H	lusband and wife wi	no are both public off	ficials and employ	yees may file th	ne required	statements jo	pintly or separately.
] `Joint Filing		Separate Filing		Not App		
DECLARANT:	SERINO	EUNICE KENEE	L.		POSITION:		INSTRUCTOR I
	(Family Name)	(First Name)	(M. I.)	-	AGENCY/C	_	VISAHAS STATE UNIVERSITY
					OFFICE AL	_	WCA , BAYBAY CITY , LEYTE
ADDRESS	STA , CRUZ ,	ZAMORA, BILAR,	BOHOI		01110212		1700010
			4	_		_	
SPOUSE:	SERINO,	MOISES NEIL	٧,		POSITION:	_	INSTRUCTOR II
	(Family Name)	(First Name)	(M. I.)	-	AGENCY/O	-	VISAYAS STATE UNIVERSITY
					OFFICE AD	_	VISCA, BOYBAY CITY, LEVTE
UNMAR	RIED CHILDREN	BELOW EIGHTE	EN (18) YEARS	OF AGE LIV	/ING IN D	ECLARANT	'S HOUSEHOLD
		NAME			DATE	OF BIRTH	AGE
		N/A,		-		N.A.	N,A.
				-			
			The state of the s	-			
		ASSETS	LIABILITIES A	ND NETWOR	יייני		
	(Including those	of the spouse and	unmarried child	dren below ei	ahteen (18	luears of a	70
1 4887770		living in	n declarant's ho	ousehold)	,	, goal o of ag	,-
1. ASSETS							
a. Real Prope	rties*						
		Part of the control o	Medical are with the content of the				
DESCRIPTION		EXACT	ASSESSED"	CURRENT FAIR			
DESCRIPTION	KIND	LOCATION	VALUE	MARKET	ACQI	JISITION	
- Teig lot house another	(elgarenden kal		(Associated to the Peace	VALUE			ACQUISITION COST
Concording to and	Commission of the second		New Mealthrope		YEAR	MODE	
N.A.	NIA -	N.A.	11 1 25				
	Nig.	W.A.	N.A.	N.A.	NIA.	NIA.	N/A,
				•		Subtotal: P	
b. Personal Pr	operties*						
	DESCRIP	TION		YEA	R ACQUIR	ĐĐ	ACQUISITION COST/
- EL	ECTRONIC'S Claptor	P. digital camera,	cellphone, etc.)		2012 - 2019	5	£ 100,000.00
PERSONAL EFFECTS Chooks , clothes, accessories, etc.)			ssonies, etc.)	2012 - 2015		\$ 50,000.00	
	CH DEPOSIT .	-			2012 - 2019	5	\$ 90,000·00
							35,000.08

		Subtotal: P	P	240,000,00	
	LIABILITIES*	AL ASSETS (a + b):	7	240,000,00	
-		ŕ			
		TO CONTACTOR OF THE PROPERTY OF THE PARTY OF			

NAME OF CREDITORS	OUTSTANDING BALANCE
N/A.	N.A.
The second	

TOTAL LIABILITIES:

NETWORTH: Total Assets Less Total Liabilities = 7 240,000,00

BUSINESS INTERESTS AND FINANCIAL CONNECTIONS

Dobine			Living in Declarant Household)				
(of Declarant/ Declarant's spouse/ Unmarried Children Below Eighteen(18) years of Age Living in Declarant Household)							
	We do not have any bu	isiness interest or fine	ancial connection.				
_ <i>I</i> /	We do not rate and	and the second s		F 15 - 15 - 13			
		NATURE OF I	BUSINESS ACQUISITION O)F			
NAME OF ENTITY/BUSINESS	BUSINESS ADDRESS	INTEREST	&/OR INTEREST OF				
ENTERPRISE		FINANCIAL CO	NNECTION				
And the second s			Control of the Contro				
none							
_	RELATIVES IN THE G	OVERNMENT SERVI	CE				
-							
(Within the Fourth	Degree of Consanguinity o	or Affinity. Include also	Bilas, Balae ana mso)				
П	I/ We do not know of a	ny relavtive/s in the g	government service.				
			NAME OF AGENCY/OFFICE	AND			
	RELATIONSHIP	POSITION	ADDRESS				
NAME OF RELATIVE				2212			
JOSE G. LABONITE OR.	FATHER	ASSOC, PROF, N	BISU-BILAR, ZAMORA, BILAR,				
	mathen	ASSOC, PROF, V	BIEV-BRATE, ZAMORA, BILATE,	BOHOL			
MARINA A LABONITE	nother	7,000					
	and cor	rect statements of m	y assets, liabilities, net worth se and unmarried children be	١,			
I hereby certify that to business interests and financia	hese are true and col	ng those of my spous	se and unmarried children be	low			
business interests and financi- eighteen (18) years of age livin	g in my household, and	d that to the best of r	ny knowledge, the above-	finity.			
eighteen (18) years of age livin enumerated are names of rela	tives in the governmen	t within fourth civil	degree of consanguinty of a				
I haraby authorize the	Ombudsman or his/h	ner duly authorized r	epresentative to obtain and s al Revenue such documents	that			
s all appropriate governme	ent agencies, mendans		-1 connections to include th	ose or			
may show my assets, liabilitie my spouse and unmarried ch	s, net worth, business	of age living with me	n my household covering pre	vious			
my spouse and unmarried ch years to include the year I firs							
years to include the year 1 mg							
Date: Dec. 03, 2015	_						
l let the Coming			NIA.				
(Signature of Declarant)		(Signature of	Co-Declarant/Spouse)				
(Signature of Deets)	,						
PHIL	HEALTH	Government Issued	NIAI				
	0104725-1	ID No.:	NIÄ,	~			
Date Issued:		Date Issued:					
	oral to before men thin	day of	2013, affiant exhibiting to n	ne the			
SUBSCRIBED AND SW above-stated government iss	ORN to before the this	uu, o	Man				
above-stated government iss	nuou ruommana anno anno anno anno anno anno ann	atty. Ry	CAN/C. GUINOCOR				
		(Per	son Administering Oath)				