## SWORN STATEMENT OF ASSETS, LIABILITIES AND NET WORTH

As of December 31, 2023

(Required by R.A. 6713)

Note: Hu	sband and wife who	are both public of	ficials and employ	ees may file t	he required statem	ents jointl	ly or separately.	
	] Joint Filing		Separate Filing		Not Applicable			
DECLARANT:	Gongora, Ganessa Rose L.				POSITION:	Media	a Production Specialist I	
	(Family Name) (First Name) (M. I.)						Office of the President	
					198		sayas State University,	
ADDRESS	Purok Spillway, Brgy. Catublian			<u></u>		ViSC	A Baybay City Leyte	
	Hinunangan S	outhern Leyto	е	-		7		
SPOUSE:	N/A				POSITION:	N/A		
	(Family Name)	(First Name)	(M. I.)	-	AGENCY/OFFICE			
					OFFICE ADDRESS	S: N/A		
UNMARE	RIED CHILDREN E	BELOW EIGHTE	EN (18) YEARS	OF AGE L	IVING IN DECL	ARANT'S	HOUSEHOLD	
		NAME			DATE OF BI	RTH	AGE	
		N/A			N/A		N/A	
		N/A		-	N/A		N/A	
		N/A	i i dina	-	N/A		N/A	
		ASSETS	, LIABILITIES A	ND NETWO	DTH			
ASSETS     a. Real Prop			ng in declarant's		w eighteen (18) y	ears of		
DESCRIPTION	KIND	EXACT LOCATION	ASSESSED VALUE	CURRENT FAIR MARKET VALUE	ACQUISITION		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 Prope	Declaration of	YEAR I	IODE		
N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	
N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	
b. Personal			2010 3110 257 287			otal: P	ACQUISITION COST/	
	DESCRIP	TION		Y	EAR ACQUIRED		AMOUNT	
Motorbike	Alleman Alexander	THE RESERVE THE STATE OF THE ST	NO. TOWNS THE PARTY		2022	The grant	79,000.00	
Cellphone					2021		17,000.00	
						4		
2. LIABILITIES	*			•	Subt	otal: P (a + b):	96,000.00	
NATURE			NAME OF CREDITORS		OUTSTANDING BALANCE			
Loan					VSUCC		308,921.00	
		h'ji	Garage (I					
			1171		TOTAL LIABIL	ı	308,921.00	
		N	ETWORTH: To	tal Assets	Less Total Liabi	lities =	- 212,921.00	

<sup>\*</sup>Additional sheet/s may be used, if necessary.

## **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.

NAME OF ENTITY/BUSINESS ENTERPRISE	BUSINESS ADDRESS	NATURE OF BUSINESS INTEREST &/OR FINANCIAL CONNECTION	DATE OF ACQUISITION OF INTEREST OR CONNECTION
N/A	N/A	N/A	N/A
N/A	N/A	N/A	N/A
N/A	N/A	N/A	N/A
N/A	N/A	N/A	N/A

## 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 relavtive/s in the government service.

NAME OF RELATIVE	RELATIONSHIP	POSITION	NAME OF AGENCY/OFFICE AND ADDRESS
MIKAELA M. GONGORA	COUZIN	MEDIA PRODUCTION SUPERVISOR	VISAYAS STATE UNIVERSITY

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 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.

Date: February	1, 2024				
Q			N/A		
(Signature of Declarant)		(Signature of C	(Signature of Co-Declarant/Spouse)		
Government Issued ID No. :	Passport P5119809c	Government Issued ID No. :	N/A N/A		
Date Issued:	08/30/2023	Date Issued:	N/A		
SUBSCRIBED above-stated gover	AND SWORN to before nonment issued identificati	on card.	2024, affiant exhibiting to me the TY. RYZAN C. GUINOCOR VSU Unief Legal Officer on Administering Oath)		