## SWORN STATEMENT OF ASSETS, LIABILITIES AND NET WORTH As of December 2022

|   |  | (I  | Required by R.A. 6         | 713)  |                          |                        |  |  |
|---|--|---|----------------------------|---|--------------------------|------------------------|--|--|
| 00.00% Note:  | Husband and ı  | vife who are both public offic  Joint Filing              | ials and employee          | s may file the require                                      | ed statemen<br>pplicable | ts jointly or s        | eparately.                             |  |
|   |  | Joint Fung  | Separate 11                | ung A a Not 11  | pplicable                |                        |  |  |
| DECLARANT:  | GALVEZ   | KARL  | A.                         | POSITION:   | - 77                     | INSTRU                 |  |  |
|   | (Family Nam  |   | (M.I.)                     | AGENCY/OFFICE   |                          |                        | TE UNIVERSITY                          |  |
| ADDRESS:  | APT. 25,KILBO<br>BAYBAY CITY                                 | DURNE DRIVE, VSU,VISCA,                                   | AND PINANCE                | OFFICE ADDRESS: VISC  |                          | ISCA, BAYBA            | CA, BAYBAY CITY, LEYTE                 |  |
| SPOUSE:   | NA   | l si gents aj age sumg ni op<br>es fitssumical eopmoetron | Tresting agrice of         | POSITION:<br>AGENCY/OFFICE:                                 |                          | N.                     | A.                                     |  |
|   | (Family Nam  | e) (First Name)   | (M.I.)                     |   |                          | 1111                   | N.A.                                   |  |
|   |  | UKE OF HUSINESS<br>EST & OR EINANCIAL<br>CONNECTION       |                            | OFFICE ADDRES   | SS:                      | N.                     | A. TAS TO SMAN                         |  |
| UNMARRII  | ED CHILDR  | en below eighteei   | N (18) YEARS               | OF AGE LIVING   | IN DEC                   | LARANT'S               | HOUSEHOLD                              |  |
|   |  | NAME  | VAME                       |   | DATE OF BIRTH            |                        | AGE<br>NA                              |  |
| 9   | NI   | 4   |                            | NA  |                          |                        |  |  |
|   |  |   | HURANOD G                  | HP WEBSTON  | 7.57                     |                        |  |  |
|   | 10310  | त । । । १ वर्ष ५ वर्ष है वर्ष है वार्                     | in a mark Astronomical Inc | Lean-s = Lis sange  | den of ede               | estavec                |  |  |
| . ASSETS  | (Inch<br>Properties*   | ding those of the spou                                    | se and unmarr              | <b>ID NETWORTH</b><br>ied children belo<br>rant's household |                          | en (18)                | GRACE ME GRACE ME MA ELENA ME LORINA A |  |
| DESCRIPTION KIND  |  | EXACT   | ASSESSED                   | CURRENT FAIR  | ACQUISITION              |                        | ACQUISITION                            |  |
| (e.g. lot, house and<br>lot, condominium<br>and improvements) | (e.g. residential<br>commercial, indus<br>agricultural and r | strial,   | (As found in the           | he Tax Declaration of<br>al Property)                       | YEAR                     | MODE                   | COST                                   |  |
| NA  | VA   | oest AN knowledge   | NA                         | NA  | NA                       | NA                     | NA                                     |  |
| 711   | nilis no viim  | râuesuos to setăan tivi                                   | n the lower C              | Littor Tribuitment  | Batti UU                 | 20 (LESIOT W           | ii o saman 5m                          |  |
|   | al Properties  | Phonzed representative of Internal Resentative *          |                            |   |                          | Subtota                | di <sup>n</sup> i<br>Irom all approj   |  |
|   |  | DESCRIPTION   |                            | YEAI  | R ACQUIRE                |                        | ACQUISITION COST/AMOUNT                |  |
| OPPO CELL PHONE   |  |   |                            | 2019  |                          |                        |  |  |
| St. Peter Plan  |  |   |                            | 2019 — 6505,.00   |                          | 18,000.00<br>36,000.00 |  |  |
| Sun Life ( life insurance plan)                               |  |   | 2019                       |   | 450,000.00               |                        |  |  |
| Cash-on-bank  |  |   | 2021                       |   | 15,000.00                |                        |  |  |
|   |  | vonent issued ID:   | words                      |   | /11/11/2                 | 10 POLITICA            | Covernment is                          |  |
| A.W   |  | A1 U3D84 (17)10   | 27 (1)                     |   | 18.110                   |                        | ID No                                  |  |
|   |  |   | 20.00                      |   | T.C.                     |                        |  |  |
| hars-sard   | e am aur or Su   | affant exitoin  | CARE VENT C                | perult me that  | O WORN TO                | re una u               | SUBSCRIB                               |  |
|   |  | Property of   |                            |   |                          | Subtotal:              | 519,000.00                             |  |
|   |  | TY, RYSAN C. GUING  |                            | TO  |                          | ETS (a+b):             | 519,000.00                             |  |

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

## LIABILITIES\*

| NATURE                    | NAME OF CREDITORS             | OUTSTANDING BALANCE |
|---------------------------|-------------------------------|---------------------|
| St. Peter Plan (Mortuary) | STATEMENT OF ASSETS, DABIETTE | 7,000.00            |
| Sun Life (Life Insurance) | As of December 2022           | 371,800.00          |

378,800.00

140,200.00

NET WORTH: Total Assets less Total Liabilities =

## BUSINESS INTERESTS AND FINANCIAL CONNECTIONS

(of 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<br>ENTERPRISE | BUSINESS ADDRESS        | NATURE OF BUSINESS<br>INTEREST &/OR FINANCIAL<br>CONNECTION | DATE OF ACQUISITION OF INTEREST OR CONNECTION |  |
|---------------------------------------|-------------------------|---|---|--|
| NA                                    | NA                      | NA  | NA  |  |
| GIORNALION TRASA D                    | ARS OF ACT LIVING IN DE | IN 181 WINTERDA WOURS                                       | TRIMARRIED CHILDRE                            |  |
| 907                                   | 61X 0 TO 3TAV           | IMAN  |   |  |

## 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             |
|----------------------|--------------|-----------------------|---|
| GRACE MONTALBAN      | Aunt         | SUPERVISOR            | DEPARTMENT OF EDUCATION                       |
| MA. ELENA A. MENDOZA | Aunt         | CITY<br>AGRICULTURIST | CITY AGRICULTURAL SERVICES OFFICE, ORMOC CITY |
| LORINA A. GALVEZ     | MOTHER       | FACULTY               | DFST,VSU                                      |

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: May 09, 2      | 2023                  |                                |                                    |  |  |
|----------------------|-----------------------|--------------------------------|------------------------------------|--|--|
| 0.040,031            | A.                    |                                |                                    |  |  |
| KARL                 | JOHN A. GALVEZ        | NA NA                          |                                    |  |  |
| (Sig                 | mature of Declarant)  | (Signature of Co-              | (Signature of Co-Declarant/Spouse) |  |  |
| Government Issued ID | : VSU ID              | Government Issued ID:          | N.A.                               |  |  |
| ID No.:              | V-01131               | ID No.:                        | N.A.                               |  |  |
| Date Issued:         | July 11, 2019         | Date Issued:                   | N.A.                               |  |  |
| SUBSCRIBED A         | ND SWORN to before me | this 0 May 2023, affiant exhib | iting to me the above-stated       |  |  |
|                      |                       | ATTY. RYSAN C. GUI             | NOCOR                              |  |  |
|                      |                       | (Person Administering          | Oath)                              |  |  |

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