SWORN STATEMENT OF ASSETS, LIABILITIES AND NET WORTH

As of December 31,2022

(Required by R.A. 6713)

DECLARANT: DESADES CHRISTY M. AGRICY (OPRICE OFFICE ADDRESS) WISAYAS STATE UNIVERSITY WIS
Carrily Name) (First Name) (M. I.) AGENCY/OFFICE OFFICE ADDRESS: VISAYAS STATE UNIVERSITY VISA
Carrily Name) (First Name) (M. I.) AGENCY/OFFICE OFFICE ADDRESS: VISAYAS STATE UNIVERSITY VISA
ADDRESS BALUGO, ALBUERA, LEYTE SPOUSE: N.A. (Family Name) (First Name) (M.1) RAGERCY/OFFICE: OFFICE ADDRESS: UNMARRIED CHILDREN BELOW EIGHTEEN (18) YEARS OF AGE LIVING IN DECLARANT'S HOUSEHOLD NAME NA. NA. NA. NA. NA. NA. NA. NA
ADDRESS BALUGO, ALBUERA, LEYTE N.A. (Family Name) (First Name) (M. I.) AGENCY/OFFICES OFFICE ADDRESS: UNMARRIED CHILDREN BELOW EIGHTEEN (18) YEARS OF AGE LIVING IN DECLARANT'S HOUSEHOLD NAME DATE OF BIRTH N.A. N.A. N.A. N.A. N.A. N.A. N.A. N.A
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Subtotal: P
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b. Personal Properties* DESCRIPTION YEAR ACQUIRED ACQUISITION COST/AMOUNT MOBILE PHONE 2019 18,000.00 LAPTOP 2016 16,000.00 ENCYCLOPEDIA 2011 24,000.00 BICYCLE 2018 3,000.00 MOTORCYCLE 2020 76,000.00
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MOTORCYCLE 2020 76,000.00
Subtotal: P 137,000.00
TOTAL ASSETS (a + b): 137,000.00
2. LIABILITIES*
NATURE NAME OF CREDITORS OUTSTANDING BALANCE
GSIS GFAL GSIS 500,000.00
GSIS MPL GSIS 100,000.00
TOTAL LIABILITIES: 600,000.00

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. DATE OF NATURE OF BUSINESS NAME OF ENTITY/BUSINESS ACQUISITION OF **BUSINESS ADDRESS** INTEREST &/OR ENTERPRISE INTEREST OR FINANCIAL CONNECTION CONNECTION 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 relautive/s in the government service. NAME OF AGENCY/OFFICE AND NAME OF RELATIVE RELATIONSHIP POSITION **ADDRESS** CHRISCEL M. DESADES SISTER TEACHER I DEP.ED/ BUNGA NATIONAL HIGH SCHOOL 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 aboveenumerated 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. APRIL 7,2023 Date: CHRISTY M. DESADES N.A. (Signature of Declarant) (Signature of Co-Declarant/Spouse) Professional Identification Card Government Issued Government Issued ID No.: 1084386 ID No. : Date Issued: 04/02/2011 Date Issued: SUBSCRIBED AND SWORN to before me this 2 Aday 2013 affiant exhibiting to me the above-stated government issued identification card. C. GUINOCOR ief Legal Officer (Person Administering Oath)