

SWORN STATEMENTS OF ASSETS AND LIABILITIES AND NETWORTH
DISCLOSURES OF BUSINESS INTERESTS AND FINANCIAL CONNECTIONS
AND IDENTIFICATION OF RELATIVES IN THE GOVERNMENT SERVICE

As of November 8, 2011
(Required by R.A.6713)

NAME Villar, Mary Annilyn L.
SURNAME FIRST NAME MI

POSITION/INCOME: _____
OFFICE _____
OFFICE ADDRESS _____

ADDRESS Brgy. Dongon, Maasin City, So. Leyte

SPOUSE NAME NA
SURNAME FIRST NAME

POSITION NA
OFFICE _____

Unmarried children below 18 years of age

NAME
NA

DATE OF BIRTH
NA

A. ASSETS, LIABILITIES AND NET WORTH

1. ASSETS

a. Real Properties

KIND	LOCATION	YEAR	MODE OF ACQUISITION	NATURE OF PROPERTY (paraphernal conjugal or community)	ASSESSED VALUE	CURRENT FAIR MARKET VALUE	ACQUISITION COST	
							LAND BLDG ETC.	IMPROVE- MENTS
NA								

b. PERSONAL AND OTHER PROPERTIES

KIND	YEAR ACQUIRED	ACQUISITION COST
<u>NA</u>		
TOTAL		

c. LIABILITIES (loans, mortgages, etc.)

NATURE	NAME OF CREDITORS	AMOUNT
<u>NA</u>		

TOTAL NA

NETWORTH (Total Assets (1a+1b) - Total Liabilities (2))

B. BUSINESS INTERESTS AND FINANCIAL CONNECTIONS

Do you have any business interests and other financial connections including those of your spouse and unmarried children below 18 years of age living with you in your household? [] Yes [X] No. If yes, give particulars:

NAME	NAME OF FIRM COMPANY	ADDRESS	Nature of Business Interest and/or Financial Connection	Date of Acquisition/ Connection
NA				

C. IDENTIFICATION OF RELATIVES IN THE GOVERNMENT SERVICE

To the best of your knowledge, are you related within the fourth degree of consanguinity or of affinity to anyone working in the government? [X] Yes [] No. If yes, give particulars:

NAME	POSITION	RELATIONSHIP	NAME/ADDRESS OF OFFICE
Aniceto C. Villar	Department Head / Instructor	Father	Dept. of Agriculture, Marikina City College
Elvira L. Oclant	Instructor	Auntie	Dept. of Pest Management, Visayas State University

(Note: Please use additional forms if necessary)

I hereby certify to the best of my knowledge and information, that these are true statements of my assets, liabilities, networth, business interests and financial connections, including those of my spouse and unmarried children below 18 years of age and names of my relatives in the government as of November 8, 2011 as required by and in accordance with Republic Act 6713.

I hereby authorize the Ombudsman or his 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, networth, business interests and financial connections, to include those of my spouse and unmarried children below 18 years of age living with me in household covering previous years to include the year I first assumed office in the government.

Date November 8, 2011

Signature of Spouse
TIN:
Comm. Res. Cert. No.
Issued at:
Date Issued:

Mabiles
Signature
TIN:
Comm. Res. Cert. No.
Issued at:
Date Issued:

SUBSCRIBED AND SWORN TO before me this 8th day of November, 2011, affiant exhibiting his/her Residence Tax Certificate as indicated above.

Michele Marie P. Polo - Tesoro
CLERK OF COURT
ATC BRANCH 14, DAYAG CITY
Person Administering Oath