# SWORN STATEMENT OF ASSETS, LIABILITIES AND NET WORTH

As of <u>December 31, 2019</u> (Required by R.A. 6713)

		oint Filing	□ Separa	te Filing   Lar Not A	oplicable
DECLARANT:	BULAHAN	JERIZZA MAY	В.	POSITION:	INSTRUCTOR I
	(Family Name)	(First Name)	(M.I.)	AGENCY/OFFICE:	DEPARTMENT OF STATISTICS
DDRESS:	SITIO CAPANGI-AN, BRGY. CURVA, ORMOC CITY,			OFFICE ADDRESS:	DEPT. OF STATISTICS, VISAYAS STATE
	LEYTE				UNIVERSITY, VISCA, BAYBAY CITY, LEYTI
POUSE:	N/A			POSITION:	N/A
	(Family Name)	(First Name)	(M.I.)	AGENCY/OFFICE:	N/A
				OFFICE ADDRESS:	N/A
	NAI	æ.			
	TAL TAL			DATE OF BIRTH	AGE
		· <del></del>			
	N/	· <del></del>		N/A	AGE N/A
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## 1. ASSETS

## a. Real Properties\*

DESCRIPTION (e.g. lot, house and	KIND (e.g. residential, commercial, industrial,	EXACT LOCATION	ASSESSED CURRENT FAIR VALUE MARKET VALUE  (As found in the Tax Declaration of Real Property)		ACQUISITION		ACQUISITION COST
lot, condominium and improvements)	agricultural and mixed use)				YEAR	MODE	
NONE							

years of age living in declarant's household)

Subtotal: 0.00

## b. Personal Properties\*

YEAR ACQUIRED	ACQUISITION COST/AMOUNT
2015	25,000
2017	15,990
2018	43,990
2018	17,500
2018	55,990
2019	15,990
	2015 2017 2018 2018 2018

**Subtotal:** 174,460

TOTAL ASSETS (a+b): 174,460.00

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

## 2. LIABILITIES\*

NAME OF CREDITORS	OUTSTANDING BALANCE
Panjobjoban Lending Company	35,500.00
Imperial Appliances	15,600.00
Government Service Insurance System	68,045.67
	Panjobjoban Lending Company Imperial Appliances

TOTAL LIABILITIES:

119,145.67

**NET WORTH: Total Assets less Total Liabilities =** 

55,314.33

#### BUSINESS INTERESTS AND FINANCIAL CONNECTIONS

(of Declarant / 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 ENTERPRISE	BUSINESS ADDRESS	NATURE OF BUSINESS INTEREST &/OR FINANCIAL CONNECTION	DATE OF ACQUISITION OF INTEREST OR CONNECTION
NONE			
	<u> </u>		

## 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
NONE			

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.

A STATE OF THE STA	IG 2020			
Date:	Management and Assessment Service Management and Assessment Assess			
yall				
(Signa	ture of Declarant)		(Signature	e of Co-Declarant/Spouse)
Government Issued ID: ID No.: Date Issued:	UMID 021 – 1747 – 4387 – 8 June 2018	ID	overnment Issued ID No.: ate Issued:	
SUBSCRIBED AN government issued iden	<b>D SWORN</b> to before me thisntification card.	1 9 AL day of	JG 2020, affiant	exhibiting to me the above-stated

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