STATEMENT OF ASSETS, LIABILITIES AND NET WORTH

As of December 31, 2020

1. ASSETS	l Properties*			in declarant's	ĺ	authorize B	
		years o	of age living	in declarant's	household)		
	(Includir	ig those of the	e spouse and	ITIES AND NE		eighteen (18	gincen (18)years numerated are ner
	s liabilities net imarmed children	nn bue senoc	statements ose of my s	ue and correct s, including th	connection	certify that and financial	l hereby Lainess interests
NA					NA		NA
UNMARR	H UNIT, MAHAPLAC	AME	HTEEN (18)	/ CHIM	TE OF BIRTH	IN DECLARA	NT'S HOUSEHO
Palisdo	OF A TOTAL AND A	SOA TO SWAY	2013	OFFI	CE ADDRESS:		NA
SPOUSE:	NA (Family Name)	N/A (First Na		,	TION: ICY/OFFICE:	Willia the Fauri Od We do	NA NA
			io waters	n the cove l	ELATIVES I	<u>R</u>	
DDRESS:	HILUSIG,	MAHAPLAG,			CE ADDRESS:		AYBAY CITY, LEYTE
ECLARANT:	MAMOLO (Formilly Norma)	LEO	a) (1)	A. POSI			NT PROFESSOR 1
ECLARANT:		Joint Filing LEO (First Na	STATE OF		Not Apprion:	ASSISTA	INT PROFESSOR 1 STATE UNIVERSIT

b. Personal Properties*

DESCRIPTION	YEAR ACQUIRED	ACQUISITION COST/AMOUNT
Clothing	2020	Php 15, 000
Furnitures	2020	Php 30, 000
Motorcycle	2019	Php 72, 000
Laptop	2018	Php 15, 000
Jewelries	2020	Php 30, 000
Appliances de synds ad an of guildelies units. In value	2020	Php 30, 500
* 1/10		
ATTY, KYSAN C. GUINOCOK	Subtotal	: Php 192, 500

Subtotal: Php 192, 500

TOTAL ASSETS (a+b): Php 192, 500

Subtotal:

2. LIABILITIES*

NATURE	NAME OF CREDITORS	OUTSTANDING BALANCE
GFAL	GSIS	Php 420, 000

TOTAL LIABILITIES: Php 420, 000

NET WORTH: Total Assets less Total Liabilities = - Php 227, 500

^{*} Additional sheet/s may be used, if necessary.

BUSINESSINTERESTSANDFINANCIALCONNECTIONS

(of Declarant / Declarant's spouse/ Unmarried Children Below Eighteen (18) years of Age Living in Declarant's Household)

2I/ 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	
ASSISTANT PROFESSOR 1		LEO A.	ECLARANT MAMOLO	
V SAYAS STATE UNIVERSITY	ROENCY/OFFICE:	(AM) [mmsk] (sm3)	(Faurity Neme)	

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	
RUTH ARMAMENTO	COUSIN	TEACHER 1	DEPED, MAHAPLAG, LEYTE	
MARYJANE MABATID	COUSIN	TEACHER 1	DEPED, MAHAPLAG, LEYTE	
MELVIN CHITO SOLIS	COUSIN	HEAD	DEPED, TACLOBAN	
RITCHELL MAMAC	COUSIN	MIDWIFE	RURAL HEALTH UNIT, MAHAPLAG, LEYTE	

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: December, 2020	0				
2/5ul-	mour				
(Signature of Declarant)			(Signature of Co-Declarant/Spouse)		
Government Issued ID: ID No.:	LTO H12-20-000780		Government Issued ID: ID No.:		
Date Issued:	01/27/2020	OC SC	Date Issued:	Вэши	
		USUS 0 7 APR	2021		
SUBSCRIBED AN government issued idea			_day of_,affiant exhibiting to r	ne the above-stated	
8			M.		
			//lgm		
			ATTY. RYSAN C. GUIN	OCOR	
			(Person Administering (Oath)	