

SWORN STATEMENT OF ASSETS, LIABILITIES AND NET WORTH

As of September 03, 2018

(Required by R.A. 6713)

Note: Husband and wife who are both public officials and employees may file the required statements jointly or separately.

☐ Joint Filing ☐ Separate Filing ☒ Not Applicable

DECLARANT:	POGADO	FRETZELJANE	O.	POSITION:	INSTRUCTOR I
	(Family Name)	(First Name)	(M.I.)	AGENCY/OFFICE:	VISAYAS STATE UNIVERSITY
ADDRESS:	BRGY. TINAGO	INOPACAN	LEYTE	OFFICE ADDRESS:	VISCA, BAYBAY CITY, LEYTE
SPOUSE:	POGADO	JHAD	Y.	POSITION:	NONE
	(Family Name)	(First Name)	(M.I.)	AGENCY/OFFICE:	N/A
				OFFICE ADDRESS:	N/A
					N/A

UNMARRIED CHILDREN BELOW EIGHTEEN (18) YEARS OF AGE LIVING IN DECLARANT'S HOUSEHOLD

NAME	DATE OF BIRTH	AGE
THYO O. POGADO	NOVEMBER 26, 2016	1 YEAR, 9 MOS.

ASSETS, LIABILITIES AND NETWORTH

(Including those of the spouse and unmarried children below eighteen (18) years of age living in declarant's household)

1. ASSETS

a. Real Properties\*

DESCRIPTION <small>(e.g. lot, house and lot, condominium and improvements)</small>	KIND <small>(e.g. residential, commercial, industrial, agricultural and mixed use)</small>	EXACT LOCATION	ASSESSED VALUE	CURRENT FAIR MARKET VALUE	ACQUISITION		ACQUISITION COST
			<small>(As found in the Tax Declaration of Real Property)</small>		YEAR	MODE	
N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A

Subtotal: N/A

b. Personal Properties\*

DESCRIPTION	YEAR ACQUIRED	ACQUISITION COST/AMOUNT
NETBOOK	2015	11,000
CELLPHONE	2017	4000

Subtotal : 15000

TOTAL ASSETS (a+b): 15,000

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



2. LIABILITIES\*

NATURE	NAME OF CREDITORS	OUTSTANDING BALANCE
N/A	N/A	N/A

TOTAL LIABILITIES: N/A

NET WORTH : Total Assets less Total Liabilities = 15,000

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

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
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 relative/s in the government service)

NAME OF RELATIVE	RELATIONSHIP	POSITION	NAME OF AGENCY/OFFICE AND ADDRESS
MARIETTA O. BALDERA	AUNT	TEACHER	DEPARTMENT OF EDUCATION, SOUTHERN LEYTE
NINA JANE O. PAZ	AUNT	TEACHER	DEPARTMENT OF EDUCATION, SOUTHERN LEYTE
PEPITO C. OLOR	UNCLE	TEACHER	DEPARTMENT OF EDUCATION, SOUTHERN LEYTE
THELMA M. OLOR	AUNT	PRINCIPAL	DEPARTMENT OF EDUCATION, SOUTHERN LEYTE
VICTORINO C. OLOR JR.	UNCLE	DRIVER	LGU SAINT BERNARD, SOUTHERN LEYTE
JOMAFIL C. OLOR	COUSIN	POLICE	PHILIPPINE NATIONAL POLICE, SOUTHERN LEYTE
VENUS R. MERTO	COUSIN	TEACHER	DEPARTMENT OF EDUCATION, SOUTHERN 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: September 3, 2018

FRETZELANE O. POGADO  
(Signature of Declarant)

\_\_\_\_\_  
(Signature of Co-Declarant/ Spouse)

Government Issued ID: NBI CLEARANCE  
ID No.: O460BFFE59-GO124066  
Date Issued: JUNE 27, 2018

Government Issued ID: \_\_\_\_\_  
ID No.: \_\_\_\_\_  
Date Issued: \_\_\_\_\_

SUBSCRIBED AND SWORN to before me this SEP 06 2018 day of \_\_\_\_\_, affiant exhibiting to me the above-stated government issued identification card.

ATTY. RYSAN C. GUINOCOR  
(Person Administering Oath)