SWORN STATEMENT OF ASSETS, LIABILITIES AND NET WORTH

As of May 13, 2025 (Required by R.A. 6713)

Note		who are both public offici Joint Filing	als and employee Separate Fi				separately.	
DECLARANT:	ESCASINAS	GILLY MAE	S.	POSITION:		ADMINISTRATIVE AIDE III VISAYAS STATE UNIVERSITY		
0.000.00	(Family Name)	(First Name)	(M.I.)	AGENCY/OFFICE:	-			
ADDRESS:				OFFICE ADDRESS	:		NGASUGAN	
	BRGY. MASLUG,	BAYBAY CITY,	LEYTE			BAYBAY CITY, LEYTÉ		
SPOUSE:	N/A (Family Name)	N/A (First Name)	N/A (M.I.)	POSITION: AGENCY/OFFICE: OFFICE ADDRESS:		N	/A	
UNMARRI	ED CHILDREN B	ELOW EIGHTEEN	(18) YEARS (F AGE LIVING	IN DEC	LARANT'S	S HOUSEHOLD	
	NA I N	ME		date of birth N/A			AGE N/A	
			vi es tra com com					
a. Real DESCRIPTION (c.g. lot, house and	Properties* KIND (e.g. residential,	EXACT LOCATION	ASSESSED	CURRENT FAIR MARKET VALUE	ACQU	USITION	ACQUISITION COST	
lot, condominium and improvements)	commercial, industrial, agricultural and mixed use)			the Tax Declaration of eal Property)	YEAR MODE			
N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	
						Interview pungs is na yenr s griba veni		
		8 1957 - 12 - 17		haberal ma	A 180	Cb4-4-1.		
b. Person	nal Properties*				·	Subtotal:		
	DES	CRIPTION		YEAR A	ACQUIREI)	ACQUISITION COST/AMOUNT	
JEWELRY				2	025	v anh	2,750.00	
HOME APPLIANCES/ FURNITURES			•	022		10,000.00		
GADGET					021		8,000.00	

N/A

Y KAREN ABEGAN, S. MONTERON

N/A

Subtotal:

TOTAL ASSETS (a+b):_

20,750.00

20,750.00

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

2. LIABILITIES*

NATURE	NAME OF CREDITORS	OUTSTANDING BALANCE
PAG-IBIG MULTIPURPOSE LOAN	PAG-IBIG	1,447.47
N/A	N/A	

TOTAL LIABILITIES:	1,447.47
less Total Liabilities =	19,302.53

NET WORTH: Total Assets less Total Liabilities =

* 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.

BUSINESS ADDRESS	NATURE OF BUSINESS INTEREST &/OR FINANCIAL CONNECTION	DATE OF ACQUISITION OF INTEREST OR CONNECTION
N/A	N/A	N/A
1 100 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		
No. of the second secon	0.76	
Contract Con	N/A	CONNECTION

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
AHLDETER S. MANTUA	COUSIN	TEACHER	DEPED
FLORANDE S. POLISTICO	COUSIN	STATISTICAL COORDINATION OFFICER	PSA
CHERAVEL S. CUTARAN	COUSIN	TEACHER	DEPED
MILONA C. LOWANGCO	COUSIN	TEACHER	DEPED
N/A	N/A	N/A	N/A

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 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.

raef.	N/A				
of Declarant)	(Signature o	(Signature of Co-Declarant/Spouse)			
ATIONAL ID	Government Issued ID:	N/A			
91-6530-2601-4093	ID No.:	N/A	Mark and and		
ptember 22, 2022	Date Issued:	N/A			
1	TIONAL ID 91-6530-2601-4093	TIONAL ID Government Issued ID: 91-6530-2601-4093 ID No.:	Of Declarant) (Signature of Co-Declarant/Spouse) TIONAL ID Government Issued ID: N/A 91-6530-2601-4093 ID No.: N/A		

SUBSCRIBED AND SWORN to before me this government issued identification card.

ffiant exhibiting to me the above-stated

(Person Administering Oath)