# SWORN STATEMENT OF ASSETS, LIABILITIES AND NET WORTH

As of December 31, 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 X Separate Filing ☐ Not Applicable DECLARANT: MAGDADARO MEDARDO JR. (Family Name) (First Name) (M.I.) AGENCY/OFFICE: VISAYAS STATE UNIVERSITY ADDRESS: BRGY LICUMA, ORMOC CITY, LEYTE OFFICE ADDRESS: VISCA, BAYBAY, LEYTE SPOUSE: MAGDADARO **ELMA** P. POSITION: NA (Family Name) (First Name) (M.I.) AGENCY/OFFICE: NA OFFICE ADDRESS: NA UNMARRIED CHILDREN BELOW EIGHTEEN (18) YEARS OF AGE LIVING IN DECLARANT'S HOUSEHOLD NAME DATE OF BIRTH AGE NA NA NA

## 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 (e.g. lot, house and lot, condominium and improvements)	KIND (e.g. residential, commercial, industrial, agricultural and mixed use)	EXACT LOCATION	ASSESSED VALUE	CURRENT FAIR MARKET VALUE	ACQUISITION		ACQUISITION COST
			(As found in the Tax Declaration of Real Property)		YEAR	MODE	
House	residential	Brgy Licuma, Ormoc City	1,000.000.00	1,000.000.00	2000	built	800,000.00
Lot	residential	Brgy Licuma, Ormoc City	500,000.00	500,000.00	2000	inhere ted	1,
			7				

b. Personal Properties\*

DESCRIPTION	YEAR ACQUIRED	ACQUISITION COST/AMOUNT	
Motorcycle	2015	80,000.00	
Bank deposits	2018	350,000.00	
Jewelry	2015	100,000.00	

Subtotal: 530,000.00

800,000.

TOTAL ASSETS (a+b): /, 330, 000-

Subtotal:

5/41

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

### 2. LIABILITIES\*

NATURE	NAME OF CREDITORS	OUTSTANDING BALANCE	
Bank loans	BDO	100,000.00	
	Citibank	100,000.00	
	*		

TOTAL LIABILITIES:

200,000.00

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

1.130,000.

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

government issued identification card.

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### 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	
Spartan Bodies Fitness Gym	Burgos St. Ormoc City	Fitness gym, proprietor	2005	
Olympic Fitness Gym	Avenida Veteranos, Tacloban City	Fitness gym, proprietor	2008	
Royce Laundry	Real St. Ormc City	Laundry shop, proprietor	2008	
Jm Food Enterprise	Pob. Hilongos, Leyte	Eatery, proprietor	2017	

## RELATIVES IN THE GOVERNMENT SERVICE

(Within the Fourth Degree of Consanguinity or Affinity. Include also Bilas, Balae and Inso)  $\square$  I/We do not know of any relative/s in the government service)

NAME OF RELATIVE	RELATIONSHIP	POSITION	NAME OF AGENCY/OFFICE AND ADDRESS
Ma. Teresa Ablen	sister	School teacher	Ormoc City National High School, Ormoc City
Mary Jean Sapan	sister	Dept Head	IHK, Visayas State University, Baybay, City
Ma. Chona Delfin	sister	employee	Dept or Agrarian Reform, Ormoc CIty

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: 4/29	/ 2019		
(Stance)	ure of Declarant)	(Signature of Co	-Declarant/Spouse)
Government Issued ID: ID No.: Date Issued:	PRIVENS LICENSE H03-99-0W 783 10-02-2017	Government Issued ID:  ID No.:  Date Issued:	
SUBSCRIBED AN	<b>D SWORN</b> to before me this _	2 2 MAY 2019 day of, affiant exh	ibiting to me the above-stated

ATTY. RYSAN C. GUINOCOI (Person Administering Oath)