SWORN STATEMENT OF ASSETS, LIABILITIES AND NET WORTH As of Dec. 31, 2019

(Required by R.A. 6713)

Joint Filing	Note: Hu	isband and wife who	are both public	officials and employ	ees may file th	e required stateme	ents jointly	y or separately.	
Gunity Numb Ciried Name OM.1 AGENCT/OFFICE: OFFICE ADDRESS. VISU-DBM VISCA, BAYBAY CITY, LEYTE		Joint Filing		Separate Filing	Ø	Not Applicable	!		
Gunity Numb Ciried Name OM.1 AGENCT/OFFICE: OFFICE ADDRESS. VISU-DBM VISCA, BAYBAY CITY, LEYTE	DEGLADARE.	LAO	VINCE			position.	INST	RUCTOR	
ADDRESS 221 R. MAGSAYSAY ST., BAYBAY CITY, LEYTE SPOUSE: NA	DECLARANT:				-				
ADDRESS POUSE: NA Crossity Name Cress						•			
SPOUSE: NA FORTHOR: NA AGENCY/OFFICE: NA OFFICE ADDRESS: NA	ADDRESS	221 R. MAGSAYS	AY ST., BAYBA	Y CITY, LEYTE	_				
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UNMARRIED CHILDREN BELOW EIGHTEEN [18] YEARS OF AGE LIVING IN DECLARANT'S HOUSEHOLD NAME NA NA NA NA NA NA NA NA NA N	SPOUSE:		(First Name)	(M. I.)	-				
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LAPTOP 2017 15,000.00		DESCRIP	TION	de e estace de la	Y :	EAR ACQUIRED	19.5. 16		
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TOTAL LIABILITIES:			• **						
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NETWORTH: Total Assets Loss Total Liabilities =

19,000.00

BUSINESS INTERESTS AND FINANCIAL CONNECTIONS

(of Declarant/ Declarant's spouse/ Unmarried Children Below Eighteen(18) years of Age Living in Declarant Household) I/ We do not have any business interest or financial connection. DATE OF NATURE OF BUSINESS NAME OF ENTITY/BUSINESS **ACQUISITION OF BUSINESS ADDRESS** INTEREST &/OR ENTERPRISE INTEREST OR FINANCIAL CONNECTION CONNECTION n/a 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 relautive/s in the government service. NAME OF AGENCY/OFFICE AND NAME OF RELATIVE RELATIONSHIP POSITION **ADDRESS** MARVIN M. LAO **FATHER** ADMIN AIDE **VSU-PRPEO** DEMELO M. LAO UNCLE ASSO, PROF **UPV CEBU GRAND UNCLE** JUANCHO M. LAO ADMIN OFFICER **VSU-SUPPLIES OFFICE** FIRST COUSIN ONCE MA. JASMINE ANGELICA T. LAO REMOVED **BANK TELLER** LANDBANK OF THE PHILIPPINES 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 relatives in the government within 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. (Signature of Decla (Signature of Co-Declarant/Spouse) DRIVER'S LICENSE Government Issued Government Issued ID No.: H12-18-001429 ID No. : 4/20/2018 Date Issued: Date Issued: 0 2020 2013, affiant exhibiting to me the SUBSCRIBED AND SWORN to before me this day of above-stated government issued identification card.

Administering Oath)