

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 Separate Filing Not Applicable

DECLARANT:	COBICO	MARY ANN	G.	POSITION:	GUIDANCE COUNSELOR
	(Family Name)	(First Name)	(M.I.)	AGENCY/OFFICE:	UNIVERSITY STUDENT SERVICES
					OFFICE
ADDRESS:	TIPAY, STA. CRUZ			OFFICE ADDRESS:	VISAYAS STATE UNIVERSITY
	BAYBAY CITY, LEYTE				BAYBAY CITY, LEYTE
SPOUSE:	NOT APPLICABLE			POSITION:	NOT APPLICABLE
	(Family Name)	(First Name)	(M.I.)	AGENCY/OFFICE:	
				OFFICE ADDRESS:	

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

NAME	DATE OF BIRTH	AGE
JONASH MIGUEL AIDAN COBICO	JANUARY 3, 2012	7

ASSETS, LIABILITIES AND NETWORK

(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	
		NOT APPLICABLE					

Subtotal: N.A.

b. Personal Properties*

DESCRIPTION	YEAR ACQUIRED	ACQUISITION COST/AMOUNT
MOTORCYCLE	2016	P 20,000.00
LAPTOP	2017	10,000.00

Subtotal : P 30,000.00

TOTAL ASSETS (a+b): P 30,000.00

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

2. LIABILITIES*

NATURE	NAME OF CREDITORS	OUTSTANDING BALANCE
INSURANCE	St. Peter Life Plan	P 38,400.00
CONSOL/HELP LOAN	GSIS	P 28,000.00
LOAN	PAG-IBIG	P 20,000.00

TOTAL LIABILITIES: P 86,400.00

NET WORTH : Total Assets less Total Liabilities = P -56,400.00

* 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
	NOT APPLICABLE		

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
NOT APPLICABLE			

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: April 11, 2019

(Signature of Declarant)

(Signature of Co-Declarant/ Spouse)

Government Issued ID: PRC/GUIDANCE COUNSELOR
ID No.: 0001605
Date Issued: MARCH 9, 2016

Government Issued ID: _____
ID No.: _____
Date Issued: _____

12 APR 2019

SUBSCRIBED AND SWORN to before me this ____ day of ____, affiant exhibiting to me the above-stated government issued identification card.

ATTY. RYSA C. GUINOCOR
VLS LEGAL OFFICER
(Person Administering Oath)