

SWORN STATEMENT OF ASSETS, LIABILITIES AND NET WORTH

As of JUNE 2013  
(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: LASQUITES, JUSTINE JANE S.  
(Family Name) (First Name) (M.I.)  
ADDRESS: FARMERS' VILLAGE, VSU, BAYBAY CITY, LEYTE  
SPOUSE: \_\_\_\_\_  
(Family Name) (First Name) (M.I.)

POSITION: INSTRUCTOR - I  
AGENCY/OFFICE: DEPT. of GEODETIC ENGG - VSU  
OFFICE ADDRESS: BAYBAY CITY, LEYTE  
POSITION: \_\_\_\_\_  
AGENCY/OFFICE: \_\_\_\_\_  
OFFICE ADDRESS: \_\_\_\_\_

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

NAME	DATE OF BIRTH	AGE
NONE		

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>	LOCATION	ASSESSED VALUE	CURRENT FAIR MARKET VALUE	ACQUISITION		ACQUISITION COST
			<small>(As found in the Tax Declaration of Real Property)</small>		YEAR	MODE	
NONE							

Subtotal: \_\_\_\_\_

b. Personal Properties\*

DESCRIPTION	YEAR ACQUIRED	ACQUISITION COST/AMOUNT
NONE		

Subtotal: \_\_\_\_\_

TOTAL ASSETS (a+b): \_\_\_\_\_

2. LIABILITIES\*

NATURE	NAME OF CREDITORS	OUTSTANDING BALANCE
NONE		

TOTAL LIABILITIES: \_\_\_\_\_

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.

NAME OF ENTITY/BUSINESS ENTERPRISE	BUSINESS ADDRESS	NATURE OF BUSINESS INTEREST &/OR FINANCIAL CONNECTION	DATE OF ACQUISITION OF INTEREST OR CONNECTION

**RELATIVES IN THE GOVERNMENT SERVICE**

(Within the Fourth Degree of Consanguinity or Affinity. Include also Bilas, Balae and Inso)

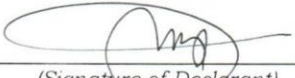
☐ I/ We do not know of any relative/s in the government service)

NAME OF RELATIVE	RELATIONSHIP	POSITION	NAME OF AGENCY/OFFICE AND ADDRESS
JAME M. LASQUIRES	FATHER	SECURITY GUARD	VSU, BAYBAY CITY
HEIDE S. LASQUIRES	MOTHER	RESEARCH ASST.	VSU, BAYBAY CITY
JAMES JADE S. LASQUIRES	BROTHER	INSTRUCTOR	USEP, TAGUM 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: JUNE 24, 2013

  
(Signature of Declarant)

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

Government Issued ID: VSU  
ID No.: 000258  
Date Issued: \_\_\_\_\_

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



SUBSCRIBED AND SWORN to before me this 27 day of JUN 2013, affiant exhibiting to me the above-stated government issued identification card.

  
ROSULO B. VIVERO  
PROSECUTOR II  
OFFICER IN CHARGE  
(Person Administering Oath)