Revised as of January 2015 Per CSC Resolution No. 1500088 Promulgated on January 23, 2015

SWORN STATEMENT OF ASSETS, LIABILITIES AND NET WORTH As of Dec. 31, 2020

(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:	MANAGBANAG	MICHAEL	v.	POSITION:	Administrative Aide III
	(Family Name)	(First Name)	(M.I.)		TO THE PROPERTY OF THE PARTY OF
				AGENCY/OFFICE:	VSU
ADDRESS:	Brgy. Pangasugan,	Baybay City		OFFICE ADDRESS:	Visca, Baybay City, Leyte
SPOUSE:	MANAGBANAG	MA.CLARISSA	R.	POSITION:	Medic Aide
	(Family Name)	(First Name)	(M.I.)	AGENCY/OFFICE:	Poly Medic, hospital
				OFFICE ADDRESS:	Cotabato, City
				OFFICE ADDRESS:	THE STATE OF THE S
	pice)	hylude elsa Fidas, Balm The gasternmunt ser	nity or Affican. relative/ s in	OFFICE ADDRESS:	LARANT'S HOUSEHOLD
YT	pice)	DREN BELOW EIGHTE	nity or Affican. relative/ s in	OFFICE ADDRESS:	NV.E

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	KIND (e.g. residential,	EXACT	ASSESSED VALUE	CURRENT FAIR MARKET VALUE	ACQ	UISITION	ACQUISITION COST
and lot, condominium and improvements)	commercial, industrial, agricultural and mixed use)		(As found in the Tax Declaration of Real Property)	YEAR	MODE	Par water opinion of	
NONE							

Subtotal: -

b. Personal Properties*

DESCRIPTION	YEAR ACQUIRED	ACQUISITION COST/AMOUNT	
Motorcycle	2017	70,000.00	
Cellphone 2 units	2017 & 2019	24,500.00	
Gas stove	2018	5,000.00	
House repair	2019-2020	400,000.00	
Appliances	2019-2020	128,000.00	
Furniture set	2020	50,000.00	

Subtotal: 627,500.00

TOTAL ASSETS (a+b): 627,500.00

2. LIABILITIES*

NATURE	NAME OF CREDITORS	OUTSTANDING BALANCE	
HELP	GSIS	29,931.83	
CONSOL	GSIS	14,099.96	
COMPUTER LOAN	GSIS	30,000.00	

TOTAL LIABILITIES: 74,031.79

BUSINESS INTERESTS AND FINANCIAL CONNECTIONS

(of 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	
NONE	Company district	gitte yair gitter	Sharmon S. C. C. Congress	
onia stosta	18031803	JE ASSESSAD, AN	OAWARDAWAX SHUOO	

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
NORBERTO MANAGBANAG	COUSIN	Adm. Aide III	VISAYAS STATE UNIVERSITY
AOE AOE	DATE OF BIRTH		STOAN
			and the same of th

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: 4-15-	121	300
Signa	ture of Declarant)	(Signature of Co-Declarant/ Spouse)
Government Issued ID: ID No.: Date Issued:	DRIVER'S LICENSE H0295037282 6-1-17	Government Issued ID: ID No.: Date Issued:
		avon pao
SUBSCRIBED AN		5 APR 2021 day of, affiant exhibiting to me the above-stated
government issued iden	ntification card.	furnitute set
		ATTY: RYSAN C. GUINOCOR
		(Person Administering Oath)