SWORN STATEMENT OF ASSETS, LIABILITIES AND NET WORTH

As of December 31, 2015

(Required by R.A. 6713)

Not		oho are both public offici oint Filing	als and employee Separate Fi	-		r separately.
DECLARANT: ADDRESS:	Family Name) J-P. LAURT	PIZAUM (First Name) ST. BATBAY,	(M.I.)	POSITION: AGENCY/OFFICE: OFFICE ADDRESS:	ASST. PRO Dept. of Teach VSU, VISCA, LEVITE	ix Education VSC BAYBAY (177,
SPOUSE:	(Family Name)	FVC AR (First Name)	(M.I.)	POSITION: AGENCY/OFFICE: OFFICE ADDRESS:	AB STATE CAREER SHIP!	A RETE MGMT PHILS, IV TY, PHILIPPINE
UNMARR	IED CHILDREN BI	ELOW EIGHTEEN	(18) YEARS (F AGE LIVING I	N DECLARANT'	S HOUSEHOLD
	N/	Ť				
1. ASSETS	(Including	those of the spous	e and unmarr	D NETWORTH ed children belou ant's household)	eighteen (18)	
DESCRIPTION		EXACT LOCATION	ASSESSED VALUE	CURRENT FAIR	ACQUISITION	ACQUISITION

SCRIPTION	KIND (c.g. residential, commercial, industrial,	EXACT LOCATION	ASSESSED VALUE	CURRENT FAIR MARKET VALUE	A STOP MEDITE STOP IN		ACQUISITION
l improvements)	agricultural and mixed		(As found in the Tax Declaration of Real Property)		YEAR	MODE	
.0T	LOSIDENTIAL	BETBAY CITY, LEYTE	P140,700		2108	Inherited	
FOUSE		BRYBAY CHY, LETTE	E .		w2	Built	p. 000,000
	-						
					÷	Subtotal:	1

b. Personal Properties*

DESCRIPTION	YEAR ACQUIRED	ACQUISITION COST/AMOUNT
CAR	2015	\$80.00
CAR	2010"	P 200 120
MOTORCYCLE	2004	P 60,000
FURNITURE + APPLIANCES	2002-2014	70,000
*	Subt	otal: \$ 410, in

TOTAL ASSETS (a+b): 7 910, NO

* Additional sheet/s may be used, if necessary... Page 1 of ___

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2. LIABILITIES:*

NATURE	NAME OF CREDITORS	OUTSTANDING BALANCE
GSIS (concal tran)	/515	lahore as
GSIS (Policy Lover)	(2515	38,000.00
DEBT	PRIVATE PEOPLE	40,00-0
MEDICAL	PERSONAL	70,000.00

TOTAL LIABILITIES:

NET WORTH: Total Assets less Total Liabilities =

BUSINESS INTERESTS AND FINANCIAL CONNECTIONS

(of Declarant / Declarant's spouse/ Unmarried Children Below Eighteen (18) years of Age Living in Declarant's Household) If I/ We do not have any business interest or financial connection.

name of Entity/Business Enterphise	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) If We do not know of any relative/s in the government service)

name of relative	RELATIONSHIP	POSITION	NAME OF AGENCY/OFFICE AND ADDRESS
		1	

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 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 19, 2014	
(Signature of Declarant)	(Signature of Co-Declarant/Spouse)
Government Issued ID: PRC ID No.: 6013 20965 Date Issued: 7/33/15	Government Issued ID: ID No.: Date Issued:
SUBSCRIBED AND SWORN to before me this _ government issued identification card.	day of, affiant exhibiting to me the above-stated
PAGE NO. 44 BOOK NO. 40/4	PUBLIC ATTORNEY OURSOANT TOTAL STATE OF THE PROPERTY OF THE P

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