SWORN STATEMENT OF ASSETS, LIABILITIES AND NET WORTH

As of <u>December 31, 2020</u> (Required by R.A. 6713)

ECLARANT:	NAPOLES	HOMER LOIS	P.	POSITION:	School Credits Evaluator
1 es	(Family Name)	(First Name)	(M.1.)	AGENCY/OFFICE:	Visayas State University
DRESS:	Gabas			OFFICE ADDRESS:	Visca, Baybay City, Leyt
· · · · ·	Baybay City, Leyte				
OUSE:	NAPOLES	JANET	C.	POSITION:	N.A.
4.0	(Family Name)	(First Name)	(M.I.)	AGENCY/OFFICE:	
	Casao	•	, ,	OFFICE ADDRESS:	
NMARRIE	Bontoc, Southern Leyte	IGHTEEN (18) YE		E LIVING IN DECLA	RANT'S HOUSEHOLI
I,	Bontoc, Southern Leyte CD CHILDREN BELOW E NAME		DAT	E LIVING IN DECLA	AGE
J	Bontoc, Southern Leyte CD CHILDREN BELOW E NAME USTIN HOLMES C. NAPO	DLES	DAT Decen	E LIVING IN DECLA TE OF BIRTH Ther 30, 2014	AGE 6
J	Bontoc, Southern Leyte CD CHILDREN BELOW E NAME	DLES	DAT Decen	E LIVING IN DECLA	AGE
J	Bontoc, Southern Leyte CD CHILDREN BELOW E NAME USTIN HOLMES C. NAPO	DLES	DAT Decen	E LIVING IN DECLA TE OF BIRTH Ther 30, 2014	AGE 6
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J	Bontoc, Southern Leyte CD CHILDREN BELOW E NAME USTIN HOLMES C. NAPO	DLES	DAT Decen	E LIVING IN DECLA TE OF BIRTH Ther 30, 2014	AGE 6

1. ASSETS

a. Real Properties*

DESCRIPTION	KIND	EXACT	ASSESSED	CURRENT FAIR	ACQUISITION	ACQUISITION
(e.g. lot, house and lot, condominium and improvements)		LOCATION		MARKET VALUE Tax Declaration of Property)	YEAR MODE	COST
						NIA

Subtotal: N.A.

b. Personal Properties*

DESCRIPTION	YEAR ACQUIRED	ACQUISITION COST/AMOUNT
Gadgets and Accessories	2016 – 2020	P 82,438.00
Appliances	2019	45,400.00
Motorcycle	2019	66,000.00

Subtotal: P 193,838.00

TOTAL ASSETS (a+b): P 193,838.00

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

2. LIABILITIES*

NATURE	NAME OF CREDITORS	OUTSTANDING BALANCE
Personal Loan	VSUCC	P 212,211.21
Motorcycle	DES Marketing	19,208.00
Life Plan	St. Peter Life Plan	31,500.00
Mortgage	Palawan Pawnshop	76,650.00

TOTAL LIABILITIES:

P 339,569.21

NET WORTH: Total Assets less Total Liabilities =

(P 145,731.21)

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
VSUCC	VSU, Baybay City, Leyte	COOPERATIVE	JUNE 2016

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
HENRY M. NAPOLES	Father	Agriculturist	LGU – Albuera, Leyte
ROSAN N. VALENZONA	Aunt	Teacher	DepEd Baybay - Baybay City, Leyte
IMELDA N. AURE	Aunt	Teacher	DepEd Baybay - Baybay City, Leyte
CALEXTRO O. AURE	Uncle-in-Law	Driver	VSU - Baybay City, Leyte
EVARISTO M. VALENZONA	Uncle-in-Law	Security Guard	LGU – Baybay City, Leyte
EDGAR M. NAPOLES	Uncle	Agriculturist	LGU - Aloguinsan, Cebu

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 12, 202 (Signature of Declarant) (Signature of Co-Declarant/Spouse) Government Issued ID: PROFESSIONAL DRIVER'S LICENSE Government Issued ID: ID No . H12-10-001764 ID No.: Date Issued: APPate Issued: SUBSCRIBED AND SWORN to before me this day of affiant exhibiting to me the above-stated government issued identification card. (Person Administering Oath)

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