

SWORN STATEMENT OF ASSETS, LIABILITIES AND NET WORTH

As of December 31, 2022

(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	Quiliones, Cecille Marie O.	POSITION:	Assistant Professor I
	(Family Name) (First Name) (M.)	AGENCY/OFFICE:	Dept. of Soil Sci., VSU
		OFFICE ADDRESS:	Visayas State University, Visca
ADDRESS	Coconut Village, Visca, Baybay City		Baybay City, Leyte 6521-A
	Leyte 6521-A		
SPOUSE:	N/A	POSITION:	N/A
	(Family Name) (First Name) (M.)	AGENCY/OFFICE:	
		OFFICE ADDRESS:	

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

NAME	DATE OF BIRTH	AGE
NA	NA	NA

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	KIND	EXACT LOCATION	ASSESSED VALUE	CURRENT FAI	ACQUISITION	ACQUISITION COST
(e.g. lot, house and lot condominium and improvements)	(e.g. residential, commercial, industrial, agricultural and mixed use)		(As found in the Tax Declaration of Real Property)		YEAR MODE	
NA		NA			NA	NA

Subtotal: P -

b. Personal Properties*

DESCRIPTION	YEAR ACQUIRED	ACQUISITION COST/ AMOUNT
CLOTHINGS	2021	50,000
LAPTOP	2021	60,000
WATCH	2021	10,000
CLOTHINGS	2022	40,000

Subtotal: P 160,000

TOTAL ASSETS (a + b):

2. LIABILITIES*

NATURE	NAME OF CREDITORS	OUTSTANDING BALANCE
PERSONAL DEBT	PRIVATE	50,000

TOTAL LIABILITIES: 50,000

NETWORTH : Total Assets Less Total Liabilities = 110,000

*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 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
N/A	N/A	N/A	N/A

RELATIVES IN THE GOVERNMENT SERVICE

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

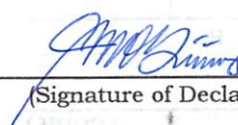
☒ I/ We do not know of any relative/s in the government service.

NAME OF RELATIVE	RELATIONSHIP	POSITION	NAME OF AGENCY/OFFICE AND ADDRESS
N/A	N/A	N/A	N/A

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 relatives in the government within 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 14, 2023

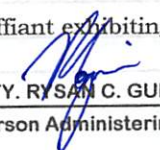

(Signature of Declarant)

NA
(Signature of Co-Declarant/Spouse)

Government Issued ID: PRC ID
ID No. : 1119270
Date Issued: 15-Jan-09

Government Issued ID: EMPLOYEE ID
ID No. : V00866
Date Issued: Dec-14

24 APR 2023
SUBSCRIBED AND SWORN to before me this ____ day of ____ 2023, affiant exhibiting to me the above-stated government issued identification card.


ATTY. RYSAN C. GUINOCOR
(Person Administering Oath)