SWORN STATEMENT OF ASSETS, LIABILITIES AND NET WORTH

As of **December 31, 2019**

(Required by R.A. 6713)

Note	e: Husband and wife	who are both public officia	ls and employ	yees may file the required sta	tements jointly or separately.	
		Joint Filing	1 Separate	Filing	able	
DECLARANT:	JOYA	MARY-ANN	D.	POSITION:	Guesthouse Caretaker	
	(Family Name)	(First Name)	(M.I.)	AGENCY/OFFICE:	Visayas State University	
ADDRESS:	Blk 68, L21, Ph 6	Carissa Homes Subd	Punta I	OFFICE ADDRESS:	Baybay City, Leyte	
	Tanza	Cavite		_		
SPOUSE:	JOYA	GLENN	A.	POSITION:	Store Manager	
	(Family Name)	(First Name)	(M.I.)	AGENCY/OFFICE:	SAED International	
				OFFICE ADDRESS:		
				_		
UNMARRI	NA	ME	<u>18) YEARS</u>	OF AGE LIVING IN D	ECLARANT'S HOUSEHOLD AGE	
	N,	/A				
				N/A		
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. Rea	l Properties*					
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DESCRIPTION		BXACT	ASSESSED CURRENT FAIR VALUE MARKET VALUE (As found in the Tax Declaration of Real Property)		ACQUISITION		 And the second problems of the second problems of the second problems.
and improvements)	(e.g. residential, commercial, industrial, agricultural and mixed use)	and the second control of the contro			YEAR	MODE	COST COST
House & lot (house improvement)	Residential	Tanza, Cavite			2012	Monthly amort	673,895.70
Lot	Residential	Tanza, Cavite			2017		258,720.00

Subtotal: 932,615.70

b. Personal Properties*

Control print one in the residence with the control of the control	YEAR ACQUIRED	COST/AMOUNT
Cash on hand and in bank		10,000.00
Jewelries	2016	10,000.00
Motorcycle	2014	55,000.00
Appliances and Gadgets	2010-2018	142,650.00
Furnitures	2016-2018	25,900.00

Subtotal: 243,550.00

1,176,165.70

TOTAL ASSETS (a+b):

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

5. LIABILITIES*

NATURE	NAME OF CREDITORS	OUTSTANDING BALANCE	
House and lot	Banko Sentral ng Pilipinas		
Loan; 1.)	vsucc	23, 683.00	
2.)	GSIS	175, 724.00	
Motorcycle	Premium Bikes	27, 720.00	

TOTAL LIABILITIES: 367, 127.00

NET WORTH: Total Assets less Total Liabilities = 809, 038.70

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
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 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.

See The Control of th			
Date:			
	R .1		
(kigng	ture of Declarant)	(Signature o	f Co-Declarant/Spouse)
Government Issued ID:	UMID	Government Issued ID:	DRIVERS LICENSE
ID No.:	02003522273	ID No.:	F09-04-000507
Date Issued:	2009	Date Issued:	August 2017
		3 0 JUN 2020	
SUBSCRIBED AN government issued idea	D SWORN to before me ntification card.	Man	exhibiting to me the above-stated
		ATTY. RYSZA C. GUINO	PAD
		VSULEGAL DEFICER	OUN

(Person Administering Oath)

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