

## SWORN STATEMENT OF ASSETS, LIABILITIES AND NET WORTH

As of **DECEMBER 31, 2023**

(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

|                   |                                |                |           |                        |                                 |
|-------------------|--------------------------------|----------------|-----------|------------------------|---------------------------------|
| <b>DECLARANT:</b> | <b>ENRIQUEZ</b>                | <b>CAMILLE</b> | <b>R.</b> | <b>POSITION:</b>       | Assistant Professor -I          |
|                   | (Family Name)                  | (First Name)   | (M.I.)    | <b>AGENCY/OFFICE:</b>  | College of Veterinary Medicine  |
| <b>ADDRESS:</b>   | <b>PUROK 1 BRGY SANTA CRUZ</b> |                |           | <b>OFFICE ADDRESS:</b> | Visayas State University, Visca |
|                   | <b>BAYBAY CITY, LEYTE</b>      |                |           |                        | Baybay City Leyte               |
| <b>SPOUSE:</b>    | <b>BORNEO</b>                  | <b>DHAREL</b>  | <b>F.</b> | <b>POSITION:</b>       | ABLE SEAMAN                     |
|                   | (Family Name)                  | (First Name)   | (M.I.)    | <b>AGENCY/OFFICE:</b>  | STATUS MARITIME                 |
|                   |                                |                |           | <b>OFFICE ADDRESS:</b> | MALATE, MANILA                  |

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

| NAME                    | DATE OF BIRTH  | AGE |
|-------------------------|----------------|-----|
| KIARA KIRSTEN E. BORNEO | MARCH 29, 2023 | 1   |
| N/A                     | N/A            | N/A |
| N/A                     | 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. Real Properties\*

| DESCRIPTION<br><small>(e.g. lot, house and lot, condominium and improvements)</small> | KIND<br><small>(e.g. residential, commercial, industrial, agricultural and mixed use)</small> | EXACT LOCATION | ASSESSED VALUE                                                    | CURRENT FAIR MARKET VALUE | ACQUISITION |      | ACQUISITION COST |
|---------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------|----------------|-------------------------------------------------------------------|---------------------------|-------------|------|------------------|
|                                                                                       |                                                                                               |                | <small>(As found in the Tax Declaration of Real Property)</small> |                           | YEAR        | MODE |                  |
| N/A                                                                                   | N/A                                                                                           | N/A            | N/A                                                               | N/A                       | N/A         | N/A  | N/A              |
| N/A                                                                                   | N/A                                                                                           | N/A            | N/A                                                               | N/A                       | N/A         | N/A  | N/A              |
| N/A                                                                                   | N/A                                                                                           | N/A            | N/A                                                               | N/A                       | N/A         | N/A  | N/A              |

**Subtotal:** N/A

##### b. Personal Properties\*

| DESCRIPTION                        | YEAR ACQUIRED | ACQUISITION COST/AMOUNT |
|------------------------------------|---------------|-------------------------|
| LAPTOP, CELLPHONE, FILM CAMERA     | VARIOUS YEARS | 80,000.00               |
| APPLIANCES (REF, OVEN, STAND FAN)  | VARIOUS YEARS | 20, 000.00              |
| CLOTHING, SHOES AND OTHER GARMENTS | VARIOUS YEARS | 10, 000.00              |
| MONEY IN BANK                      | VARIOUS YEARS | 500,000.00              |

**Subtotal :** 610,000.00

**TOTAL ASSETS (a+b):** 610,000.00

\* Additional sheet/s may be used, if necessary.

**2. LIABILITIES\***

| NATURE | NAME OF CREDITORS | OUTSTANDING BALANCE |
|--------|-------------------|---------------------|
| N/A    | N/A               | N/A                 |
| N/A    | N/A               | N/A                 |
| N/A    | N/A               | N/A                 |
| N/A    | N/A               | N/A                 |

**TOTAL LIABILITIES:** N/A

**NET WORTH : Total Assets less Total Liabilities = 610,000**

\* 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'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                                           |
| N/A                                | N/A              | N/A                                                   | N/A                                           |
| N/A                                | N/A              | N/A                                                   | N/A                                           |
| 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 |
|------------------|--------------|----------|-----------------------------------|
|                  |              |          |                                   |
|                  |              |          |                                   |
|                  |              |          |                                   |
|                  |              |          |                                   |
|                  |              |          |                                   |

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:

  
CAMILLE R. ENRIQUEZ  
(Signature of Declarant)

(Signature of Co-Declarant/Spouse)

Government Issued ID: DRIVER'S LICENSE  
ID No.: H12-14-001269  
Date Issued: 06/10/2021

Government Issued ID: N/A  
ID No.: N/A  
Date Issued: N/A

**SUBSCRIBED AND SWORN** to before me this AUG 15 2024 day of   , affiant exhibiting to me the above-stated government issued identification card.

**ATTY. JULIE TANYA P. LANZAR**  
Roll of Attorney's No. 75423  
(Person Administering Oath)  
**NOTARY PUBLIC**

Notarial Commission No. B-23-01-01  
To Expire on December 31, 2024

IBP OR No. 396315 / 04-January-2024 / Leyte  
PTR No. 0210020 / 01-04-2024 / Baybay City  
Attended MCLE Compliance No. VII - 0006464  
2A Luna St., Zone 9, Baybay City, Leyte

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