SWORN STATEMENT OF ASSETS, LIABILITIES AND NET WORTH

As of **December 31, 2021**

(Required by R.A. 6713)

 $\textbf{Note:} \ \textit{Husband and wife who are both public officials and employees may file the required statements jointly or separately. \\$

	u J	oint Filing	Separate Fi	ing	Not A	орисавие		
DECLARANT:	SALABA	O ANA	LITA	A.	POSIT	ion:	Associ	iate Professor
	(Family Name	e) (First	Name)	(M.I.)	AGEN	CY/OFFICE:	Visaya	s State Univers
ADDRESS:	APT. 68, KILBOU	RNE ST.,			OFFIC	E ADDRESS:	VISCA	, Baybay City, L
	VSU, BAYBAY CITY	, LEYTE			-			
SPOUSE:	SALABA	O ORLAN	DO LOU	В.	POSIT	ION:	OFW	
	(Family Name	e) (First	Name)	(M.I.)	AGEN	CY/OFFICE:	Kuma	atso, Inc.
					OFFIC	E ADDRESS:	Japar)
	NAN Nor			DATE	OF BIRTH		AGE	
1. ASSETS		ASSETS, LIA those of the spouse years of age li	and unmarr	ed child	dren belot	v eighteen (18	3)	
a. Real	Properties*							
DESCRIPTION	KIND	EXACT	ASSESSED	CURRI	ent fair	ACQUISITIO	N A	CQUISITION

DESCRIPTION (e.g. lot, house and	KIND (c.g. residential,	EXACT LOCATION	ASSESSED	CURRENT FAIR MARKET VALUE	1		ACQUISITION COST	
lot, condominium commercial, industrial agricultural and mixed use)		the same of the state of the st	(As found in the Tax Declaration of Real Property)		YEAR	MODE		
Lot	Residential	Ormoc City	180,000	200,000	2002	Purchase	140,000	
Lot	Residential	Guadalupe, Baybay City	300,000	1,000,000	2020	Purchase	500,000	
	:							

b. Personal Properties*

DESCRIPTION	YEAR ACQUIRED	ACQUISITION COST/AMOUNT	
Jewelry	1996	60,000	
Furniture/Appliances	1992	105,000	
Bank Deposits	2010	2,000,000	

Sub-total: 2,165,000

640,000

TOTAL ASSETS (a+b): 2,805,000

Subtotal:

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

2. LIABILITIES*

NATURE	SET LIEBLE	NAME OF CREDITORS	OUTSTANDING BALANCE
Loan	GSIS	o someone to sa	100,000
	es mus pin tu	aetigilas pur sperillo appa y non ato organifin	Surlandsult sotos
net Applicable	gs Bust	A supardes F and Fallor F	

TOTAL LIABILITIES: 100,000

NET WORTH: Total Assets less Total Liabilities = 2,705,000

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
none	HU MI UMIVILI MIVA NO ES	MAI (81) PAGITMENT PLANTS	Regulatio Game Lambio
NO.	DATE OF RECE	STELA	

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
Jane A. Pica	SISTER	Asst. Principal for Instruction	Leyte Nat'l. High School, Tac. City
Cornelia A. Abella	SISTER	Auditor	COA, Tac. City
Silvestre P. Abella	BROTHER	Engineer	DPWH, Reg. 8, Tac. City
Silverio P. Abella	BROTHER	Govt. Employee	DPWH, Baybay City
		1 000 000	A STATE OF THE PARTY OF THE PAR

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 18/2022		HOITE	
	ature of Declarant)	(Signature of C	Co-Declarant/Spouse)
Government Issued ID; VSU ID ID No.: V000460 Date Issued:		Government Issued ID: ID No.: Date Issued:	Bank Deposits
	ID SWORN to before ned identification card.	2 0 APR 2022 me thisday ofaffia ATTY RYSANC GUINOCO VSU Guer Legal Officer	ant exhibiting to me the above-
		(Person Administer) Page 2 of	ing Oath)

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