

## SWORN STATEMENT OF ASSETS, LIABILITIES AND NET WORTH

As of **December 31, 2019**

(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:** ALBA ARTURO JR. B.  
(Family Name) (First Name) (M. I.)

**POSITION:** Administrative Aide I

**AGENCY/OFFICE:** OVPAP

**OFFICE ADDRESS:** VSU, Baybay City, Leyte

**ADDRESS** Brgy. Guadalupe Baybay City, Leyte

**SPOUSE:** ALBA ROSEMARIE C.  
(Family Name) (First Name) (M. I.)

**POSITION:** N/A

**AGENCY/OFFICE:** \_\_\_\_\_

**OFFICE ADDRESS:** \_\_\_\_\_

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

NAME	DATE OF BIRTH	AGE
<u>ALEXA LOISE C. ALBA</u>	<u>January 29, 2005</u>	<u>15</u>
<u>THURFOX GREGORY C. ALBA</u>	<u>June 16, 2008</u>	<u>12</u>

### 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 <small>(e.g. lot, house and lot, condominium and improvements)</small>	KIND <small>(e.g. residential, commercial, industrial, agricultural and mixed)</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	
HOUSE	Residential	Brgy. Guadalupe			2010	Inherited	

Subtotal: P \_\_\_\_\_

##### b. Personal Properties\*

DESCRIPTION	YEAR ACQUIRED	ACQUISITION COST / AMOUNT
Refrigerator	2015	8,000.00
Sala set	2005	8,000.00
Cellphone samsung galaxy note II	2017	10,000.00
Samsung Tab	2017	7,000.00
Honda XRM 125	2019	25,000.00

Subtotal: P **58,000.00**

**TOTAL ASSETS (a + b): 58,000.00**

#### 2. LIABILITIES\*

NATURE	NAME OF CREDITORS	OUTSTANDING BALANCE
Loan	VSUCC	10,000.00

**TOTAL LIABILITIES: 10,000.00**

**NETWORTH : Total Assets Less Total Liabilities = 48,000.00**

## 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			

## 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
Doreen B. Alba	Sister	Admin.Aide III	SPPMO, VSU

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.

16 JUN 2020  
Date : \_\_\_\_\_

  
ARTURO B. ALBA JR.

(Signature of Declarant)

\_\_\_\_\_  
(Signature of Co-Declarant/Spouse)

Government Issued ID: \_\_\_\_\_

ID No. : \_\_\_\_\_

Date Issued: \_\_\_\_\_

Government Issued ID: \_\_\_\_\_

ID No. : \_\_\_\_\_

Date Issued: \_\_\_\_\_

SUBSCRIBED AND SWORN to before me this \_\_\_\_\_ day of \_\_\_\_\_ 2017 affiant exhibiting to me the above-stated government issued identification card.

16 JUN 2020  
  
RYSAN C. GUINOCOR  
(Person Administering Oath)