STATEMENT OF ASSETS, LIABILITIES AND NET WORTH

As of <u>December 31, 2023</u> (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: BALOTITE SHEERWINA MAE G. POSITION: ASSISTANT PROFESSOR I (First Name) (M.I.) AGENCY/OFFICE: VISAYAS STATE UNIVERSITY (Family Name) GUADALUPE, BAYBAY CITY, LEYTE OFFICE ADDRESS: VISCA, BAYBAY CITY, LEYTE ADDRESS: SPOUSE: BALOTITE DIONILO E. POSITION: NA (M.I.) AGENCY/OFFICE: (Family Name) (First Name) OFFICE ADDRESS:

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

AGE
NA NA
1

ASSETS, LIABILITIES AND NET WORTH

(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 (e.g. lot, house and	KIND (e.g. residential,	LOCATION	ASSESSED VALUE	CURRENT FAIR MARKET VALUE	ACQU	DISITION	ACQUISITION COST
lot, condominium and improvements	commercial, industrial, agricultural and mixed use)			the Tax Declaration of al Property)	YEAR	MODE	
NA	NA	NA	NA	NA	NA	NA	AN ate: March
	4760				TILL		

b. Personal Properties*

DESCRIPTION	YEAR ACQUIRED	ACQUISITION COST/AMOUNT
Ladies' Bicycle	2016	P4,000.00
Appliances	2017	P10,000.00
Electronic Gadgets	2018	P20,000.00
Electronic Gadgets	2019	P7,000.00
Ladies' Bicycle of ambients a maille. To volume air	2019 MA MAOWE CHA	P6,000.00
Multicab	2020 bass nortestitateli.	P 200,000.00
Jewelries	2021	P 5,000.00
Acer Laptop	2021	P 35,148.00
Electronic Gadgets	2023	P 10,999.00

Subtotal: P 298,147.00

Subtotal:

TOTAL ASSETS (a+b): P 298,147.00

2. LIABILITIES*

NATURE	NAME OF CREDITORS	OUTSTANDING BALANCE
GSIS MPL	GSIS	P 103,580.64

TOTAL LIABILITIES: P 103,580.64

NET WORTH: Total Assets less Total Liabilities = P 194,566.36

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

BUSINESS INTERESTS AND FINANCIAL CONNECTIONS

(of Declarant's spouse/ Unmarried Children Below Eighteen (18) years of Age Living in Declarant's Household) \square 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
NA	NA CERTAIN	NA MANAGEMA	a NA NA
	MANUS YOUR DA	grame talls amad dis	par

RELATIVES IN THE GOVERNMENT SERVICE

(Within the Fourth Degree of Consanguinity or Affinity. Include also Bilas, Balae and Inso) \square I/We do not know of any relative/s in the government service)

NAME OF RELATIVE	RELATIONSHIP	POSITION	NAME OF AGENCY/OFFICE AND ADDRESS
Bichelle A. Gonzaga	Sister	Teacher III	Dep.Ed/Baybay City, Leyte
Brigido Rudillo W. Gonzaga	Father	Barangay Kagawad	Local Government/Guadalupe, Baybay City, Leyte
CENTRESCORE DESCRIPTION	A BO READE OF A	TOWARD WALLER R	add tho watakiy Matti
		W	

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.

ate: March 7, 2024		AM AM	Nath
120 150000	uture of Declarant)	(Signature o	of Co-Declarant/Spouse)
Government Issued ID:	PRC	Government Issued ID:	Driver's License
ID No.:	1111167	ID No.:	H12-11-002379
Date Issued:	August 2012	Date Issued:	02/02/2023

1 3 MAR 2024

SUBSCRIBED AND SWORN to before me this _____day of_,affiant exhibiting to me the above-stated government issued identification card.

ATTY. RYSAN C. GUINOCOR

Attorney IV (Person Administering Oath)