SWORN STATEMENT OF ASSETS, LIABILITIES AND NET WORTH

As of December 31, 2020 (Required by R.A. 6713)

DECLARANT:		BONNEACLO	₽.		dmin. AIQ.III
ADDRESS:	(Family Name)	(First Name)	CKY (M.I.)	AGENCY/OFFICE: OFFICE ADDRESS:	VISAYAS STATE UNIVERSITY VISCA, BAYBAY, LEYTE
SPOUSE:	(Family Name)	(First Name)	(M.I.)	POSITION: AGENCY/OFFICE:	MANE
				OFFICE ADDRESS:	HOP
UNMARR		BELOW EIGHTE	CEN (18) YEAR	do not have any busine everances appress	DECLARANT'S HOUSEHOL
UNMARR		The Later of the L	CEN (18) YEAR	RS OF AGE LIVING IN	

1. ASSETS

a. Real Properties*

KIND (e.g. residential,	EXACT LOCATION	ASSESSED VALUE	CURRENT FAIR MARKET VALUE		ISITION	ACQUISITION
agricultural and mixed use)		(As found in the Tax Declaration of Real Property)		YEAR	MODE	
residential	zone.l comada lype Baybay	\$10,000.00	ball on kent	1999	Purchas	e \$ 19600 00
ceridential?	zonc. Guada lupe Baybay	P800,0000	donnestanja. 1 k in div house	2013	constru	\$500,000.00
gree of consan	sh itar e result servi	dalillo Istomeres	atives in the pu	bi ya k	e annino	sus bedeleaur
2	commercial, industrial, agricultural and mixed use)	commercial, industrial, agricultural and mixed use) Residential Zone Comada Upe Baybay EDNE Comada	Commercial, industrial, agricultural and mixed use) Residential Zone Company \$\text{Emada}\$ (As found in the Told Real Properties of the	Commercial, industrial, agricultural and mixed use) Residential Zone. Emada D 0,000.00 Residential Zone. Emada D 0,000.00 Residential Zone. Emada D 0,000.00	Commercial, industrial, agricultural and mixed use) Residential Zone. Emada #10,000.00 1999 Residential Zone. Emada #200,000 2013	Commercial, industrial, agricultural and mixed use) Residential Zone. Camada D 0,000.00 1999 Purchase Residential Zone. Camada D 0,000.00 1999 Purchase

years of age living in declarant's household)

b. Personal Properties*

DESCRIPTION	YEAR ACQUIRED	ACQUISITION COST/AMOUNT	
motor cycle Red	2011	115,200 00	
1 " egole Blue	2014	175,000.00	
1 M Cycle Black	202	130,000-00	
Charles of the se	PANTA NEW	TO THE RESERVE TO THE	

Subtotal: 360, 200 . 00

TOTAL ASSETS (a+b): 1,170, 200. 0

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

2. LIABILITIES*

NATURE	NAME OF CREDITORS	OUTSTANDING BALANCE	
LOKN.	mpc	157,00.00	
WAN	MCGB ORMOC	155000	
LOAN	Macc	10,000.00	
COAN	GYAC	135,000.00	

TOTAL LIABILITIES:

NET WORTH: Total Assets less Total Liabilities =

* 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) ☐ 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	100 m	5.6	

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
1/2/1/			
10/18	12 200 00 00 12 13		TOURS STREET STREET
	SECTION TO SELECT	STANGER .	
A PERTURNA	The state of Value of		The second secon

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 aboveenumerated 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: 04, 19/21	
(Signature of Declarant)	(Signature of Co-Declarant/Spouse)
Government Issued ID: ID No.: Date Issued:	Government Issued ID: ID No.: Date Issued:

1 9 APR 2021 his ____day of _2021, affiant exhibiting to me the above-stated SUBSCRIBED AND SWORN to before me this government issued identification card.

(Person/Administering Oath)