SWORN STATEMENT OF ASSETS, LIABILITIES AND NET WORTH

Note: Husband and wife who are both public officials and employees may file the required statements jointly or separately.

As of December 2021 - 91 (Required by R.A. 6713)

	Joint Filing	I D s or susp	Separate Filing		Not Appl	licable		
DECLARANT:	DAMAS	BONIFACIO) JR . B . (M. I.)		POSITION:	ADM	ADMINISTRATIVE AIDE GCD, VSU	
Zimi toavis	(Family Name)	(First Name)			AGENCY/O			
					OFFICE AD	DRESS: VSU	, VISCA BAYBAY	
DDRESS	marcos pa	ybay orty,	LEYIE	-			CITY LEYTE	
POUSE:	OQUIAS	anafe	C-		POSITION:	H1	DUSE KEEPER	
	(Family Name) (First Name) (M. I.)			_	AGENCY/O	N/A N/A		
		OFFICE ADDRESS:		DRESS:				
UNMARR	IED CHILDREN	BELOW EIGHT	EEN (18) YEARS	OF AGE LI	VING IN D	ECLARANT'S	HOUSEHOLD	
		NAME			DATE	OF BIRTH	AGE	
	(gent mm soluc	one	g et Againg, we	Consangain	in salled	tari o e sata nen	(W)	
	ment service.	s in the govern	any relavities	nat knote of	I/ We do			
- COMA STORE AND	4.20K304.50 m	ASSETS	, LIABILITIES A	AND NETWO	RTH			
	(Including those	of the spouse an			righteen (18) years of age		
. ASSETS		living	in declarant's h	ousenoiaj				
a. Real Proper	ties*							
DESCRIPTION	KIND	EXACT LOCATION	ASSESSED VALUE	CURRENT FAIR MARKET VALUE	ACQUISITION		ACQUISITION COST	
(e.g. lot, house and lot condominium and improvements)	(e.g.residential, commercial, industrial, agricultural and mixed		(As found in the Tax Real Prop	Declaration of	YEAR	MODE		
House	RESIDENTIAL	MAR GOS, BAY BAY CATT, LEYTE	rrect statementing those of mid that to the i	t (c.e) o ions, arclud usebold, ar	1991	PURCHONED	70,000,00	
<i>improvements</i>	RESIDENTIAL	MARCOS, BAYBAY CITY, LEVIE	rivol milim loury	2040 35	2016	PURCHASED	80,000,00	
and secure	tative to obtain		her duly autho	leid to man	Ombudan	Subtotal: P	150, 200,06	
b. Personal Pr								
	YEAR ACQUIRED			ACQUISITION COST,				
MOTOR OY CLE					2013		40,000,00	
APPLIANCES				20	010- 201	17,000,00		
FURNITURE	2011- 2019			35,000,00				
						Jane as		
	rant/Spause)	cure of Co-Declar	(Signa		(11	e of Declarar	(Signatur	
					TOTAL AC	Subtotal: P	92,000,00	
. LIABILITIES*					TOTAL AS	oeis (a + b):	242,000,00	
	NAME OF CREDITORS			OUTSTANDING BALANCE				
GALARY W	AN	IGNALUS -	e alo yaba	Part of G	SIC	OWS GWV	25,000,00	
MALARY LOT	PAG -181G			16,000, 60				
	tont	lati ad usy				IARILITIES:		

NETWORTH: Total Assets Less Total Liabilities =

000 00

201.

BUSINESS INTERESTS AND FINANCIAL CONNECTIONS

I hereby certify that these are true and correct statements of my assets, liabilities, net worth, outsiness interests and financial connections, including those of my spouse and unmarried children belighteen (18) years of age living in my household, and that to the best of my knowledge, the above-numerated are names of relatives in the government within fourth civil degree of consanguinity or affirm and serious all appropriate government agencies, including the Bureau of Internal Revenue such documents to may show my assets, liabilities, net worth, business interests and financial connections, to include the nay spouse and unmarried children below 18 years of age living with me in my household covering prevears to include the year I first assumed office in government. Date: MAY, 4, 2021 Government Issued D. No.: VOC 637 I, 4, 2022 - 13078981 Date Issued: 1 1 MAY 2022 SUBSCRIBED AND SWORN to before me this day of 2022 Afaffiant exhibiting to me above-stated government issued identification card.	NAME OF ENTITY/BUSINESS ENTERPRISE	BUSINESS ADDRES	s interi	OF BUSINESS EST &/OR CONNECTION	DATE OF ACQUISITION OF INTEREST OR CONNECTION	
RELATIVES IN THE GOVERNMENT SERVICE (Within the Fourth Degree of Consanguinity or Affinity. Include also Bilas, Balae and Inso)	HOUE	A MOITTO	37.71	Lean and		
RELATIVES IN THE GOVERNMENT SERVICE (Within the Fourth Degree of Consanguinity or Affinity. Include also Bilas, Balae and Inso) We do not know of any relative/s in the government service. NAME OF RELATIVE RELATIONSHIP POSITION NAME OF AGENCY/OFFICE ADDRESS						
RELATIVES IN THE GOVERNMENT SERVICE (Within the Fourth Degree of Consanguinity or Affinity. Include also Bilas, Balae and Inso) We do not know of any relative/s in the government service. NAME OF RELATIVE RELATIONSHIP POSITION NAME OF AGENCY/OFFICE ADDRESS	SELECT TOTAL	ноликоч	- 5 - 5 - 5 - 5	200 - 3	ine Court	
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 relavtive/s in the government service. NAME OF RELATIVE RELATIONSHIP POSITION NAME OF AGENCY/OFFICE ADDRESS	Ontras N/A	A SOFTEO				
Within the Fourth Degree of Consanguinity or Affinity. Include also Bilas, Balae and Inso)						
NAME OF RELATIVE RELATIONSHIP POSITION NAME OF AGENCY/OFFICE ADDRESS I hereby certify that these are true and correct statements of my assets, liabilities, net worth, issiness interests and financial connections, including those of my spouse and unmarried children beighteen (18) years of age living in my household, and that to the best of my knowledge, the above-tumerated are names of relatives in the government within fourth civil degree of consanguinity or affirm all appropriate government agencies, including the Bureau of Internal Revenue such documents to any show my assets, liabilities, net worth, business interests and financial connections, to include the yay show my assets, liabilities, net worth, business interests and financial connections, to include the yay show my assets, liabilities, net worth, business interests and financial connections, to include the yay show my assets, liabilities, net worth, business interests and financial connections, to include the yay show my assets, liabilities, net worth, business interests and financial connections, to include the yay show my assets, liabilities, net worth, business interests and financial connections, to include the yay show my assets, liabilities, net worth, business interests and financial connections, to include the wind properties of my knowledge, the above-ment is net worth, business interests and financial connections, to include the yay show my assets, liabilities, net worth, business interests and financial connections, to include the properties of my knowledge, the above-ment is network. MAY 4 2021 Signature of Co-Declarant/Spouse) Overnment Issued NSU EMPLO YEE 10 Government Issued I D No.: Date Issued: 1 MAY 2022 SUBSCRIBED AND SWORN to before me this day of 2022 Affiant exhibiting to me over-stated government issued identification card.				SHOW	d Inso)	
I hereby certify that these are true and correct statements of my assets, liabilities, net worth distinctions interests and financial connections, including those of my spouse and unmarried children below a lamper of the above-numerated are names of relatives in the government within fourth civil degree of consanguinity or affiliation and a second all appropriate government agencies, including the Bureau of Internal Revenue such documents to any show my assets, liabilities, net worth, business interests and financial connections, to include the ysouse and unmarried children below 18 years of age living with me in my household covering prevents to include the year I first assumed office in government. The property of the control of the property of the prop		I/We do not know of an	ny relavtive/s in the	government se	rvice.	
I hereby certify that these are true and correct statements of my assets, liabilities, net worth, usiness interests and financial connections, including those of my spouse and unmarried children beighteen (18) years of age living in my household, and that to the best of my knowledge, the above-numerated are names of relatives in the government within fourth civil degree of consanguinity or affiliate the constant of the properties of the constant of the properties and appropriate government agencies, including the Bureau of Internal Revenue such documents that show my assets, liabilities, net worth, business interests and financial connections, to include the years to include the year of age living with me in my household covering prevents to include the year I first assumed office in government. Suppose (Signature of Co-Declarant/Spouse) Ono.: MAY. 4. 2021 Subscribed AND SWORN to before me this	NAME OF RELATIVE	RELATIONSHIP	POSITION	NAME OF AGENCY/OFFICE AN ADDRESS		
I hereby certify that these are true and correct statements of my assets, liabilities, net worth, usiness interests and financial connections, including those of my spouse and unmarried children beighteen (18) years of age living in my household, and that to the best of my knowledge, the above-numerated are names of relatives in the government within fourth civil degree of consanguinity or affiliation of the construction of the properties of the construction of the state of the construction of the state of the construction of the constructi	none				BUSIN	
I hereby certify that these are true and correct statements of my assets, liabilities, net worth, issiness interests and financial connections, including those of my spouse and unmarried children beighteen (18) years of age living in my household, and that to the best of my knowledge, the above-numerated are names of relatives in the government within fourth civil degree of consanguinity or affiliation. I hereby authorize the Ombudsman or his/her duly authorized representative to obtain and see on all appropriate government agencies, including the Bureau of Internal Revenue such documents the ay show my assets, liabilities, net worth, business interests and financial connections, to include the yay spouse and unmarried children below 18 years of age living with me in my household covering prevars to include the year I first assumed office in government. MAY 4. 2021 MAY 4. 2021 Government Issued ID No.: Date Issued: 1 1 MAY 2022 SUBSCRIBED AND SWORN to before me this day of 2022/Maffiant exhibiting to me over-stated government issued identification card.				100000000000000000000000000000000000000		
I hereby certify that these are true and correct statements of my assets, liabilities, net worth, disiness interests and financial connections, including those of my spouse and unmarried children being the model of the power of age living in my household, and that to the best of my knowledge, the above-numerated are names of relatives in the government within fourth civil degree of consanguinity or affiliation. I hereby authorize the Ombudsman or his/her duly authorized representative to obtain and see that appropriate government agencies, including the Bureau of Internal Revenue such documents to all appropriate government agencies, including the Bureau of Internal Revenue such documents to all appropriate government agencies, including the Bureau of Internal Revenue such documents to all appropriate government agencies, including the Bureau of Internal Revenue such documents to all appropriate government agencies, including the Bureau of Internal Revenue such documents to all appropriate government agencies, including the Bureau of Internal Revenue such documents to all appropriate government agencies, including the Bureau of Internal Revenue such documents to all appropriate government agencies, including the Bureau of Internal Revenue such documents to all appropriate government agencies, including the Bureau of Internal Revenue such documents to obtain and see the propriet agencies and financial connections, to include the agencies and financial connections, to include the government. Signature of Co-Declarant/Spouse) Ween Internal Revenue such documents to obtain and see the propriet agencies and financial connections, to obtain and see the propriet agencies and financial connections, to obtain and see the propriet agencies and financial connections, to obtain and see the propriet agencies and financial connections and financial connections. Signature of Co-Declarant/Spouse) Signature of Co-Declarant/Spouse) Signature of Co-Declarant/Spouse and unmarried children below 18 years of age living with me					Real Properties:	
I hereby certify that these are true and correct statements of my assets, liabilities, net worth, disiness interests and financial connections, including those of my spouse and unmarried children being ghteen (18) years of age living in my household, and that to the best of my knowledge, the abovenumerated are names of relatives in the government within fourth civil degree of consanguinity or affiliation of the properties of the constant of the constant of the properties of the constant of the properties of the properties of the constant of the properties of the propertie		CHARRY LIST	yana araga	e compa	S TOP MANAGEMENT	
Isiness interests and financial connections, including those of my spouse and unmarried children beighteen (18) years of age living in my household, and that to the best of my knowledge, the above-numerated are names of relatives in the government within fourth civil degree of consanguinity or affiliation. I hereby authorize the Ombudsman or his/her duly authorized representative to obtain and second all appropriate government agencies, including the Bureau of Internal Revenue such documents the ay show my assets, liabilities, net worth, business interests and financial connections, to include the years to include the year I first assumed office in government. Attention of Declarant (Signature of Co-Declarant/Spouse) ONO.:	ELEGICIONICO A SECULIARIO DE LA CONTRACTOR DE LA CONTRACT	ME SEE TOURNE LE	BULLAY EQU	1 gov B		
(Signature of Declarant) (Signature of Co-Declarant/Spouse) Overnment Issued O No.: Atter Issued: SUBSCRIBED AND SWORN to before me this	Isiness interests and financial ghteen (18) years of age living numerated are names of relative I hereby authorize the Com all appropriate government ay show my assets, liabilities, y spouse and unmarried child	connections, including in my household, and to we in the government where the general control of the control of	g those of my spous that to the best of a within fourth civil duly authorized re the Bureau of Internaterests and financing age living with me i	my knowledge, degree of consa epresentative to al Revenue suc al connections,	ed children below the above- nguinity or affinity o obtain and secure h documents that to include those of	
(Signature of Co-Declarant/Spouse) overnment Issued O No.: ate Issued: SUBSCRIBED AND SWORN to before me this day of 2022/affiant exhibiting to me power-stated government issued identification card.	ears to include the year I first a	SAR				
(Signature of Co-Declarant/Spouse) overnment Issued O No.: ate Issued: SUBSCRIBED AND SWORN to before me this day of 2022/affiant exhibiting to me bove-stated government issued identification card.	ate: m #7 4. 2020	2018			\$10 K5 Aa	
SUBSCRIBED AND SWORN to before me this day of 2022 affiant exhibiting to me bove-stated government issued VSU EMPLOYEE 10	ate: m #7 4. 2020	2013 2010- 20 2011- 20			DRICK CE	
SUBSCRIBED AND SWORN to before me this day of 2022 affiant exhibiting to me pove-stated government issued identification card.	B, Oquas	2013 001-0100 2011- 201 t)		Co-Declarant/Spo	ouse)	
ATTY, RYSARYC, GUINOCOR	(Signature of Declaran overnment Issued VSU EME VOG 637	PLO YEE ID ((Signature of C Government Issued ID No. : Date Issued:		ouse)	