

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:	MAMOLO	LEO	A.	POSITION:	ASSISTANT PROFESSOR 1
	(Family Name)	(First Name)	(M.I.)	AGENCY/OFFICE:	VISAYAS STATE UNIVERSITY
ADDRESS:	HILUSIG,	MAHAPLAG,	LEYTE	OFFICE ADDRESS:	VISCA, BAYBAY CITY, LEYTE
SPOUSE:	NA	N/A	N/A	POSITION:	NA
	(Family Name)	(First Name)	(M.I.)	AGENCY/OFFICE:	NA
				OFFICE ADDRESS:	NA

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

NAME	DATE OF BIRTH	AGE
NA	NA	NA

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 use)</small>	LOCATION	ASSESSED	CURRENT FAIR	ACQUISITION		ACQUISITION COST
			VALUE	MARKET VALUE	YEAR	MODE	
			(As found in the Tax Declaration of Real Property)				
NA	NA	NA	NA	NA	NA	NA	NA

Subtotal: N/A

b. Personal Properties*

DESCRIPTION	YEAR ACQUIRED	ACQUISITION COST/AMOUNT
Clothing	2019	Php 10, 000
Furnitures	2019	Php 20, 000
Motorcycle	2019	Php 72, 000
Laptop	2018	Php 15, 000
Jewelries	2019	Php 20, 000
Appliances	2019	Php 22, 500

Subtotal : Php 159, 500

TOTAL ASSETS (a+b): Php 159, 500

2. LIABILITIES*

NATURE	NAME OF CREDITORS	OUTSTANDING BALANCE
GSIS LOANS	GSIS	Php 100, 000
COOP LOAN	VISCO	Php 20, 000

TOTAL LIABILITIES: Php 120, 000

NET WORTH: Total Assets less Total Liabilities = Php 39, 500

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

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

RELATIVES IN THE GOVERNMENT SERVICE

(Within the Fourth Degree of Consanguinity or Affinity. Include also Bilas, Balae and Inso)

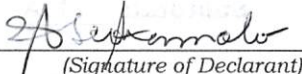
☐ I/ We do not know of any relative/s in the government service)

NAME OF RELATIVE	RELATIONSHIP	POSITION	NAME OF AGENCY/OFFICE AND ADDRESS
RUTH ARMAMENTO	COUSIN	TEACHER 1	DEPED, MAHAPLAG, LEYTE
MARYJANE MABATID	COUSIN	TEACHER 1	DEPED, MAHAPLAG, LEYTE
MELVIN CHITO SOLIS	COUSIN	HEAD	DEPED, TACLOBAN
RITCHELL MAMAC	COUSIN	MIDWIFE	RURAL HEALTH UNIT, MAHAPLAG, LEYTE

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: June 15, 2020


(Signature of Declarant)

(Signature of Co-Declarant/ Spouse)

Government Issued ID: LTO
ID No.: H12-20-000780
Date Issued: 01/27/2020

Government Issued ID: _____
ID No.: _____
Date Issued: _____

15 JUN 2020

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)