SWORN STATEMENT OF ASSETS, LIABILITIES AND NET WORTH

As of December 2018-31

(Required by R.A. 6713)

Note: Hu	sband and wife who	are both public o	fficials and employe	es may file the	required statement	s jointly or sep	arately.
	Joint Filing		Separate Filing		Not Applicable		
DECLARANT: ADDRESS	(Family Name) Bray-Gree ;	FERMANDO (First Name) Baybay City	(M. I.)		POSITION: AGENCY/OFFICE: OFFICE ADDRESS:	NEAYAR & VISCA, Payt	tate Universi
SPOUSE:	(Family Name)	ROSTA (First Name)	ζ. (M. I.)		POSITION: AGENCY/OFFICE: OFFICE ADDRESS:		
UNMARE	RIED CHILDREN E	ELOW EIGHT	EEN (18) YEARS	OF AGE LIV	ING IN DECLARA	NT'S HOUSE	HOLD
		NAME			DATE OF BIRT		AGE
	MA						
1. ASSETS	(Including those o	f the spouse an	d unmarried child in declarant's hou	ren below eig		of age	
a. Real Proper	rties*						

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 Declaration of Real Property)		YEAR	MODE		
LAND	Exemential	GTAS, Baybay	38, M. TV	40,000.00	2011	They ity	0	
HOUSE	Leschentind	Grae Baybay	11 11 11 11 11 11	20,00. iv	7011	Inherited	0	

Subtotal: P

0

b. Personal Properties*

DESCRIPTION	YEAR ACQUIRED	ACQUISITION COST/ AMOUNT	
Farniture	2004-2017	to, 100. W	
App Wance	7013-7017	40, 00 · 00	
Motoreycle	2013 - 2017	747, m. n	
Clothing	かりかーかり7	40,000.00	
3			

Subtotal: P

25, m.n

TOTAL ASSETS (a + b):

215,000-

2. LIABILITIES*

NATURE	pto selection	NAME OF CREDITORS	OUTSTANDING BALANCE	
LOAN	511.3	CK13 (Caneal)	110,000.00	
LOAD		GSIS (HELD)	140,000	
·	1 1/2	4.2		

TOTAL LIABILITIES:

20,000.0V

NETWORTH: Total Assets Less Total Liabilities

-35,000

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. DATE OF NATURE OF BUSINESS NAME OF ENTITY/BUSINESS ACQUISITION OF **BUSINESS ADDRESS** INTEREST &/OR ENTERPRISE INTEREST OR FINANCIAL CONNECTION 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 relautive/s in the government service. NAME OF AGENCY/OFFICE AND RELATIONSHIP POSITION NAME OF RELATIVE **ADDRESS** MONE 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 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. UNIV. ID Government Issued Government Issued ID No.: ID No.: Date Issued: Date Issued: SUBSCRIBED AND SWORN to before me this 1 5 APR 2019 2913, affiant exhibiting to me the above-stated government issued identification card.

on Administering Oath)