SWORN STATEMENT OF ASSETS, LIABILITIES AND NET WORTH

As of **August 1, 2018**

(Required by R.A. 6713)

Note: H	usband and wife who	are both public of	ficials and emplo	yees may file ti	he required sto	atements joi	intly or separately.	
] Joint Filing		Separate Filing		Not Applie	cable		
DECLARANT:	VILLAFUERTE	JENELYN	S.	LOSA PROMI	POSITION: SI		BUBSTITUTE INSTRUCTOR	
	(Family Name)	(First Name)	(M. I.)		AGENCY/OF		ISAYAS STATE UNIVERSIT	
ADDRESS	BRGY. MALIGAYA	MAHAPLAG, LI	EYTE		OFFICE ADD	RESS: _V	ISCA, BAYBAY CITY, LEYT	
				_		_		
SPOUSE:	N/A (Family Name)	(First Name)	(M. I.)	_	POSITION:			
	(Camily Came)	(13.1.)			AGENCY/OFFICE: OFFICE ADDRESS:			
UNMAR	RIED CHILDREN B		CEN (18) YEAR	S OF AGE LI	VING IN DE	CLARANT	'S HOUSEHOLD	
		NAME		- 1,000	DATE O	F BIRTH	AGE	
		ASSETS.	LIABILITIES	AND NETWO	RTH			
	(Including those of	the spouse and	d unmarried chil	ldren below e		years of ag	ge	
1. ASSETS		living	in declarant's h	ousehold)				
a. Real Prope	erties*							
DESCRIPTION	DESCRIPTION KIND EXACT LOCATION		ASSESSED CURRENT FAIR VALUE MARKET		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		YEAR	MODE	ACQUISITION COST	
27015.7 105	A da mar mal		Lant of the L	in illustraci	-	alul sşa	in kraen (a Tuerndal)	
VIII.211.672								
						Subtotal: P	2016 (001 201 <u>-</u>	
b. Personal P	roperties*							
	DESCRIPT	ION	120 17 12 12	YE	EAR ACQUIR	ED	ACQUISITION COST/	
LAPTOP					2014		P12,000	
						Subsect 5	12 000	
				,	FOTAL ASS	Subtotal: P		
2. LIABILITIES*					O I ALI MOO	aro (st⊥ D	j	
NATURE			NAME OF CREDITORS			OUTSTANDING BALANCE		
ĵ			Date Issued:	Nº-			- She used wisco	
	or arrivates entire?	DESCRIPTION OF THE PROPERTY OF	_ to yet		20120 W. Y.		+	
		SALLYN.	-		TOTAL LIA			
		N	IETWORTH : T	otal Assets l	Less Total L	iabilities	= 12,000	

BUSINESS INTERESTS AND FINANCIAL CONNECTIONS

(of Declarant/ Declarant's spouse/ Unmarried Children Below Eighteen(18) years of Age Living in Declarant Household)

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)

 \square I/We do not know of any relavtive/s in the government service.

NAME OF RELATIVE	RELATIONSHIP	POSITION	NAME OF AGENCY/OFFICE AND ADDRESS	
VY JOY C. DE ASIS	COUSIN	TEACHER	HILUSIG ES, MAHAPLAG LEYTE	
			h h	

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 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.

Date: AUGUST 1, 2018	
In.	
(Signature of Declarant)	(Signature of Co-Declarant/Spouse)
Government Issued NPI ID No.: V416WDN 59-128230349 Date Issued: 8-24-18- Touluban City	Government Issued ID: ID No.: Date Issued: AUG 2 8 2018
SUBSCRIBED AND SWORN to before me this _ above-stated government issued identification card.	day of 2018 affiant exhibiting to me the
	RYSAN C. GUINOCOR (Person Administering Oath)