SWORN STATEMENT OF ASSETS, LIABILITIES AND NET WORTH

As of Dec. 31, 2020

(Required by R.A. 6713)

		☐ Joint Filing	□ Separ	rate Filing 🖊 Not Applicable	atements jointly or separately.
DECLARANT:	ORACION	ROBERTO	ī.	POSITION:	Administrative Aide VI
	(Family Name)	(First Name)	(M.I.)		
				AGENCY/OFFICE:	vsu
ADDRESS:	Brgy. Gaas, Baybay	City		OFFICE ADDRESS:	Visca, Baybay City, Leyte
		WI SERVICE	S GOVERNME	RELATIVES IN TH	
SPOUSE:	ORACION	ROSA GEMMA	D.	POSITION:	House Wife
	(Family Name)	(First Name)	(M.I.)	ACENCY (OFFICE.	
				AGENCY/OFFICE:	
				OFFICE ADDRESS:	
					ROLANDO L ORACION
	UNMARRIED CHIL	DREN BELOW EIGH	TEEN (18) YEARS	S OF AGE LIVING IN DECL	ARANT'S HOUSEHOLD
	NAI	ME		DATE OF BIRTH	AGE
	non search children	NE TOTAL TOTAL	ding those o	inese pre mae and cial connections, incl	ousiness interests and finan-
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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

Real Properties*

DESCRIPTION	KIND	EXACT	ASSESSED	CURRENT FAIR	ACQ	UISITION	ACQUISITION COST
(e.g. lot, house and lot, condominium and improvements)	(e.g. residential, commercial, industrial, agricultural and mixed use)	LOCATION		MARKET VALUE the Tax Declaration of 1 Property)	YEAR	MODE	
HOUSE	RESIDENTIAL	Brgy. Gaas, Baybay City	ell) terummano		2019	Installment	600,000.00

Subtotal: 600,000.00

b. Personal Properties*

DESCRIPTION	YEAR ACQUIRED	ACQUISITION COST/AMOUNT
Motorcycle	2008	30,000.00
Appliances	2006-2012	32,000.00

Subtotal: 62,000.00 TOTAL ASSETS (a+b): 662.000.00

2. LIABILITIES*

NATURE	NAME OF CREDITORS	OUTSTANDING BALANCE
HELP	GSIS	26,018.32
CONSOL	GSIS	125,370.00
EMERGENCY LOAN	GSIS	18,033.32

TOTAL LIABILITIES: 169,421.64

NET WORTH: Total Assets less Total Liabilities = 492,578.36

^{*} 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
	protection of the Application of	C Contract of the Contract of	
NONE	ALTWIN STREET	n syratting	Bryman dannya
		1.50) Invisit to Bill	Comet gionest
	AOPROY/OFFICE		

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 relative/s in the government service)

NAME OF RELATIVE	RELATIONSHIP	POSITION	NAME OF AGENCY/OFFICE AND ADDRESS
ROLANDO I. ORACION	BROTHER	Adm. Aide I	VISAYAS STATE UNIVERSITY

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.

MI 121 M

(Signat	ture of Declarant)	(Signature of Co-Declarant/ Spouse)
overnment Issued ID:	VSU	Government Issued ID:
No.:	V000 4 3 B	ID No.:
ate Issued:		Date Issued:
	to a comply of same	
		4 APR 2021
SUBSCRIBED ANI		4 APR 2021
SUBSCRIBED AND	SWORN to before me this	4 APR 2021
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