Revised as of January 2015 Per CSC Resolution No. 1500088 Promulgated on January 23, 2015

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 31, 2019

(Required by R.A. 6713)

P	Joint Filing		Separate Filing		Not Appl	icable	
ECLARANT:	GUINOCOR	RYSAN	C.		POSITION:		ATTORNEY IV
	(Family Name)	(First Name)	(M. l.)	-	AGENCY/O	ffice: V	SU, LEGAL OFFICE
					OFFICE AD	DRESS: V	su, Baybay City, Leyte
ADDRESS	Apt. 86. Kilbo	urne St., VSU	l	_			
	Baybay City, Leyte	!		-		_	
SPOUSE:	GUINOCOR,	MERRY CHRI	STL S		POSITION:		MEDICAL OFFICER II
	(Family Name)	(First Name)	(M. I.)	-	AGENCY/O	FFICE: V	SU, HOSPITAL
					OFFICE AD	dress: V	SU, Baybay City, Leyte
UNMAR	RIED CHILDREN	BELOW EIGHT	EEN (18) YEARS	OF AGE LI	VING IN D	ECLARAN'	r's household
		NAME			DATE	OF BIRTH	AGE
	ZEKE RYGAN SUP	NET GUINOCOR			Septem	ber 22,2012	? 7 years old
	ZIAH RIONA SUPN	ET GUINOCOR		-	Decem	ber 21,2014	5 year old
1. ASSETS a. Real Prope	erties*	uvug	g in declarant's he	ousenou			
DESCRIPTION	HRD	EXACT LOCATION	Assessed Value	CURRENT FAIR MARKET VALUE	ACQ	uisitton	ACQUISITION COST
(e.g. lot, house and lot condominium and	(e.g.residential; commercial, industrial,		(As found in the Tax Real Prope		YEAR	MODE	
NONE							
					<u></u>	Subtotal:	P N.A.
b. Personal F	roperties* DESCRIE	TION		*	EAR ACQUI	RED	ACQUISITION COST,

2. LIABILITIES*

CASH ON BANK

CLOTHING

ISUZU MUX

PC, CELLPHONE & GADGETS

FURNITURES, APPLIANCES

NATURE	NAME OF CREDITORS	Outstanding Balance
CONSOL LOAN	GSIS	514,937.40
HELP LOAN	GSIS	16,516.38
BPI CAR LOAN	BPI	410,638.00
		2 42 224 72

TOTAL LIABILITIES:

TOTAL ASSETS (a + b): '

Subtotal: P

2010-PRESENT

2010- Present

2014- Present

2014-Present

2016

942,091.78

264,000.00

151,006.00

150,000.00

50,000.00

1,259,940.00 1,874,946.00

1,874,946.00

NETWORTH: Total Assets Less Total Liabilities =

932,854.22

^{*}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 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
NA			

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 AND ADDRESS
ATTY. FLORANTE A. CAYUNDA	COUSIN	BOARD MEMBER	5TH DISTRIC OF LEYTE
CLARO HENRY C. GUINOCOR	BROTHER	FIRE OFFICER	BFP
DR. EVELYN M. GUINOCOR	GRANDMOTHER	CITY HEALTH OFFICER	BAYBAY CITY
ENGR. ESTER LINA G. HORTELLAN	AUNTIE	ENGR. 3	DPWH, BAYBAY
MRS. IMELDA T. ABING	AUNTIE	CLERK	LAPU-LAPU CITY HALL
ENGR. PERLA T. AMAR	AUNTIE	HEAD OBO	I APILI APII CITY HALL

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: 1/16/2	2020 AUINOCOR	MERRY CHRIST U	S. GUINOCOR			
(Signature	of Declarant)	(Signature of Co-Decl	(Signature of Co-Declarant/Spouse)			
Government Issued ID ID No.:	: VSU ID	Government Issued ID:	100 ON			
Date Issued:	7000700	Date Issued:	1000000			
	AND SWORN to before me ment issued identification	DR. EDGAF	affiant exhibiting to me the			