

SWORN STATEMENT OF ASSETS, LIABILITIES AND NET WORTH

As of March, 2017
(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: MESIAS INISH CHRIS P
(Family Name) (First Name) (M. I.)

ADDRESS Brig. Gaddupe, Baybay City, Leyte

SPOUSE: NA
(Family Name) (First Name) (M. I.)

POSITION: INSTRUCTOR 1

AGENCY/OFFICE: VSU / DFST

OFFICE ADDRESS: Baybay City, Leyte

POSITION: _____

AGENCY/OFFICE: _____

OFFICE ADDRESS: _____

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

NAME	DATE OF BIRTH	AGE
<u>NA</u>	<u>NA</u>	<u>NA</u>

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 unit, etc.)</small>	KIND <small>(e.g. private, public, etc.)</small>	EXACT LOCATION	ASSESSED VALUE <small>(As shown in the Tax Declaration Form)</small>	CURRENT FAIR MARKET VALUE	ACQUISITION		ACQUISITION COST
					YEAR	MODE	
<u>None</u>							

Subtotal: P _____

b. Personal Properties*

DESCRIPTION	YEAR ACQUIRED	ACQUISITION COST / AMOUNT
<u>Laptop</u>	<u>2016</u>	<u>19,000</u>
<u>Cellphone</u>	<u>2013</u>	<u>7,500</u>
<u>Motorcycle</u>	<u>2014</u>	<u>50,000</u>
<u>Printer/Scanner/Photocopier</u>	<u>2014</u>	<u>7,000</u>

Subtotal: P 83,500.00

TOTAL ASSETS (a + b): 83,500.00

2. LIABILITIES*

NATURE	NAME OF CREDITORS	OUTSTANDING BALANCE
<u>None</u>		

TOTAL LIABILITIES: _____

NETWORTH : Total Assets Less Total Liabilities = 83,500.00

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
none			

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
Jade P. Mesias	Brother	Municipal Agriculturist	Municipal Agriculture Office, Asturias, Cebu
Fely P. Valenzona	Aunt	Teacher	Count Elem School / Count, Pinar, Cebu

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 : March 7, 2017

[Signature]
(Signature of Declarant)

Government Issued
ID No. : PhilHealth NO. 1300-0103-4627
Date Issued: _____

(Signature of Co-Declarant/Spouse)

Government Issued
ID No. : _____
Date Issued: _____

SUBSCRIBED AND SWORN to before me this _____ day of MAR 07 2017, affiant exhibiting to me the above-stated government issued identification card.

[Signature]
ATTY. RYSAN C. GUINOCOR
(Person Administering Oath)