

SWORN STATEMENT OF ASSETS, LIABILITIES AND NET WORTH

As of December 31, 2016

(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: LABISORES ROTSEN B.
(Family Name) (First Name) (M. I.)

POSITION: Instructor I

AGENCY/OFFICE: Visayas State University

OFFICE ADDRESS: Visca, Baybay City, Leyte

ADDRESS Cor. JA Santos & C Arellano Sts.,
Zone 5, Baybay City, Leyte

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

POSITION: _____

AGENCY/OFFICE: _____

OFFICE ADDRESS: _____

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

| NAME | DATE OF BIRTH | AGE |
|------------|---------------|------------|
| <u>N/A</u> | <u>N/A</u> | <u>N/A</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 and improvement)</small> | KIND <small>(e.g. residential, commercial, industrial, agricultural and mixed)</small> | EXACT LOCATION | ASSESSED VALUE <small>(As found in the Tax Declaration of Real Property)</small> | CURRENT FAIR MARKET VALUE | ACQUISITION | | ACQUISITION COST |
|--|---|----------------|---|---------------------------|-------------|-----------|------------------|
| | | | | | YEAR | MODE | |
| <u>N/A</u> | <u>N/A</u> | <u>N/A</u> | <u>N/A</u> | <u>N/A</u> | <u>N/A</u> | <u>NA</u> | <u>N/A</u> |

Subtotal: P _____

b. Personal Properties*

| DESCRIPTION | YEAR ACQUIRED | ACQUISITION COST/AMOUNT |
|----------------------|---------------|-------------------------|
| <u>Acer Notebook</u> | <u>2013</u> | <u>13,600.00</u> |
| | | |
| | | |
| | | |

Subtotal: P 13,600.00

TOTAL ASSETS (a + b): 13,600.00

2. LIABILITIES*

| NATURE | NAME OF CREDITORS | OUTSTANDING BALANCE |
|------------|-------------------|---------------------|
| <u>N/A</u> | <u>N/A</u> | <u>N/A</u> |

TOTAL LIABILITIES: _____

NETWORTH : Total Assets Less Total Liabilities = 13,600.00

*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 |
|------------------------------------|------------------|---|---|
| N/A | | | |
| | | | |
| | | | |
| | | | |

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 |
|------------------|--------------|----------|-----------------------------------|
| N/A | | | |
| | | | |
| | | | |
| | | | |

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 November 2016


(Signature of Declarant)

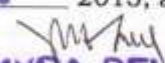
(Signature of Co-Declarant/Spouse)

Government Issued ID: PRC license
ID No. : 000 8463
Date Issued: 15 Sept. 2016

Government Issued ID: _____
ID No. : _____
Date Issued: _____

SUBSCRIBED AND SWORN to before me this NOV 02 2016 day of 2016, affiant exhibiting to me the above-stated government issued identification card.

DOC. NO. 4193
PAGE NO. 88
BOOK NO. 2016
SERIES OF 2016


ATTY MYRA BELLE L. NURI
(Person Administering Oath)