

SWORN STATEMENT OF ASSETS, LIABILITIES AND NET WORTH

As of December 31, 2024
(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:	MOLINA (Family Name)	EDELINA (First Name)	B. (M.I.)	POSITION:	ADMINISTRATIVE OFFICER II
				AGENCY/OFFICE:	DEPED – DIVISION OF ORMOC CITY
ADDRESS:	DISTRICT 28, CITY, LEYTE	HERMOSILLA DRIVE	ORMOC	OFFICE ADDRESS:	C.S. MENDOLA ST. BRGY. DON FELIPE LARRAZABAL, ORMOC CITY, LEYTE, PHILIPPINES
SPOUSE:	MOLINA (Family Name)	MARLAW (First Name)	T. (M.I.)	POSITION:	N/A
				AGENCY/OFFICE:	N/A
				OFFICE ADDRESS:	N/A

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

NAME	DATE OF BIRTH	AGE
MAEVE JANCIS BAGARINAO MOLINA	MAY 23, 2013	11 YEARS OLD

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 improvements)</small>	KIND <small>(e.g. residential, commercial, industrial, agricultural and mixed use)</small>	EXACT LOCATION	ASSESSED VALUE	CURRENT FAIR MARKET VALUE	ACQUISITION		ACQUISITION COST
			<small>(As found in the Tax Declaration of Real Property)</small>		YEAR	MODE	
Lot	Agricultural	Brgy. Patag, Ormoc City	-	-	2022	Cash	250,000.00

Subtotal: 250,000.00

b. Personal Properties*

DESCRIPTION	YEAR ACQUIRED	ACQUISITION COST/AMOUNT

Subtotal : 0.00

TOTAL ASSETS (a+b): 250,000.00

* Additional sheet/s may be used, if necessary.

2. LIABILITIES*

NATURE	NAME OF CREDITORS	OUTSTANDING BALANCE
Loan	BDO	340,800.00
Loan	East West	144,000.00

TOTAL LIABILITIES: 484,800.00

NET WORTH : Total Assets less Total Liabilities = Php(234,800.00)

* 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'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
NONE	N/A	N/A	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
GINA S. SALUBRE	AUNT	ADA VI	LGU-KANANGA
ELENITA B. PRIAS	AUNT	TEACHER II	DEPED – DIVISION OF ORMOC CITY
RICARDO T. BAGARINAO	UNCLE	Scientist I	UNIVERSITY OF THE PHILS – OPEN UNIVERSITY CENTER FOR OPEN AND DIGITAL TEACHING AND LEARNING

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.

Date: January 27, 2025

(Signature of Declarant)
Government Issued ID: UMID
ID No.: 011-1106-4427-4
Date Issued:

(Signature of Co-Declarant/ Spouse)
Government Issued ID:
ID No.:
Date Issued:

SUBSCRIBED AND SWORN to before me this 05 day of February, affiant exhibiting to me the above-stated government issued identification card.

(Person Administering Oath)