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

Note: H	lusband and wife u	ho are both public	officials and employ	lees may file t	he required s	tatement	s jointly	or separately.
] Joint Filing		Separate Filing					1500
DECLARANT:	JUALO	JUNE CAR	LO B.		POSITION:			INSTRUCTORI
	(Family Name)	(First Name)	(M. I.)		AGENCY/O	FFICE:		DoPAC
					OFFICE AD		VISA	YAS STATE UNIVERSIT
ADDRESS LONOY, MAASIN CITY, SOUTHERN LEYTI				1			E	BAYBAY CITY, LEYTE
SPOUSE:	N/A (Family Name)	(F. AM			POSITION:		N/A	
	(ranniy Name)	(First Name)	(M. I.)		AGENCY/O	FFICE:	N/A	
					OFFICE ADI	DRESS:	N/A	
UNMAR	RIED CHILDREN	N BELOW EIGHT	TEEN (18) YEARS	OF AGE LI	VING IN DE	CLARA	NT'S F	HOUSEHOLD
		NAME	manuave.	ant cla		OF BIRT		AGE
	N/A					N/A	п	N/A
		are the stage of the second	A 34 A LOVE OF A SECTION	lu platel i e				
	300000000000000000000000000000000000000	ASSET	S, LIABILITIES A	ND NETWO	TAMET			
	(Including those		nd unmarried child			uears o	f age	
1. ASSETS		livin	g in declarant's ho	ousehold)		9-0-1-0-1	, age	
I. ADDETO								
a. Real Prope	erties*							
				aveneva				
DESCRIPTION	KIND	EXACT	ASSESSED	FAIR	ACQUISITION			
		LOCATION	VALUE	MARKET VALUE				ACQUISITION COST
(e.g. lot, house and lot condominium and improvements)	(e.g. residential, commercial, industrial, agricultural and mixed		(As found in the Tax I Real Prope		YEAR	MOD	E	
	Traffic separation of	502 to 500 to		75 SER SILT	Anna anna			
N/A	N/A	N/A	N/A	N/A	N/A	N/A	1	N/A
		a service the t	al stragness h	n place Track	oak ful et .	1- 2		com tele compa
			1 *- Street Land Indy 3	resembled and				
Y						Subtotal	. D	N.A.
b. Personal P	ronerties*					Subtotal	_	-
		Lack a visit	ol, - danomi,					
	DESCRI	PTION		YE	EAR ACQUIR	ED		ACQUISITION COST/ AMOUNT
CELLULAR PHONE				2017				PHP 10,000.00
							1/	1111 10,000.00
							_	
								i anali
	1-7,107,2,7		-9.270				-	
						Subtota	l. P	10,000.00
				,			_	10,000.00
2. LIABILITIES*					TOTAL ASS	mro (a	. b): _	.0,000.00
<u>.</u>	NATU	RE		NAMI	E OF CREDI	TOPS		OUTSTANDING
NT / A					or creedi	LOKS		BALANCE
				N/A			7 - 1 - 1	N/A
			7 A					
	(rifeO prime)	FRANK HOR MA	1461		TOTAL LIA	BILITII	ES: 1	N·A

NETWORTH: Total Assets Less Total Liabilities

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

10,000.00

BUSINESS INTERESTS AND FINANCIAL CONNECTIONS

(of Declarant/ Declarant's spouse/ Unmarried Children Below Eighteen(18) years of Age Living in Declarant Household)

 \square 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	N/A	N/A	N/A	
	10.160			

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
JOJIE B. JUALO	MOTHER	TEACHER III	DEPED, MAASIN CITY
JIEN APRIL B. JUALO	SIBLING	J.O. ENGINEER	DPWH, MAASIN CITY
ENRICO S. JUALO	FATHER	J.O.	PROVINCIAL CAPITOL, MAASIN CITY
	11-11-11-11-11-11-11-11-11-11-11-11-11-		5.5

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:	
(Signature of Declarant)	(Signature of Co-Declarant/Spouse)
Government Issued	Government Issued
ID No.:	ID No.:
Date Issued:	Date Issued:
SUBSCRIBED AND SWORN to before me this _ above-stated government issued identification card.	FEB 1 2 2019 and affiant exhibiting to me the
	VSU Liperson Addrain stering Oath)