SWORN STATEMENT OF ASSETS, LIABILITIES AND NET WORTH

As of September 2020

(Required by R.A. 6713)

Note				pioyees ma			ents jointly or separately.	
П	Joint Filing		Separate Filing		Not Applic	cable		
DECLARANT:	SUGANO	SARAH JEA	N C.		POSITION:	IN	STRUCTOR I	
	(Family Name)	(First Name)	(M. I.)		AGENCY/OF	FICE: VI	SAYAS STATE UNIVERSITY	
					OFFICE ADDRESS:		VISCA, BAYBAY CITY, LEYTE	
ADDRESS	UPPER GUA	DALUPE, BAYB	AY CITY, LEYTE					
SPOUSE:		NA			POSITION:		NA	
	(Family Name)	(First Name)	(M. I.)		AGENCY/OF	FICE: NA		
					OFFICE ADD			
UNM	IARRIED CHI	LDREN BELOW	EIGHTEEN (18) YE	ARS OF A	GE LIVING	IN DECLA	ARANT'S HOUSEHOLD	
	NAME			DATE OF BIRT		OF BIRTH	AGE	
		NA				NA	NA	
		A	SSETS, LIABILITIE	ES AND NI	TWORTH			
a. Real Propertion	roperties*	EXACT	ASSESSED VALUE FAIR ACQUISITION					
	KIND	LOCATION	ASSESSED VALUE	MARKET VALUE	ACQU	DISTTION	ACQUISITION COST	
(e.g. lot, house and ot condominium and improvements)	(e.g.residential, commercial, industrial, agricultural and mixed		(As found in the Tax Deck Real Property)	aration of	YEAR	MODE		
NA	NA	NA	NA	NA	NA	NA	NA	
b. Person	al Properties	*	esse men to seu di je to nesc odo or men man desset - Ota	Liedrau Sid. Arei Tibbeuri	to the gue	Subtotal: P		
DESCRIPTION				YEAR ACQUIRED		IRED	ACQUISITION COST/	
ASUS LAPTOP				2017		Sis //rooms	16,000.0	
CELLULAR PHONE				2019		50 ,4166	9,000.0	
EPSON PRINTER				2018			5,000.0	
						Subtotal: P	30,000.0	
				•	TOTAL ASS	SETS (a + 1	b): 30,000.0	
2. LIABILIT	IES*						-10	
NATURE				NAME OF CREDITORS		DITORS	OUTSTANDING BALANCE	
NA					NA		NA	
	A CONTRACTOR OF THE PARTY OF TH				TOTAL LI	ABILITIES	3:	

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

BUSINESS INTERESTS AND FINANCIAL CONNECTIONS

NAME OF ENTITY/BUSINESS ENTERPRISE	BUSINESS ADDRESS	NATURE OF BUSINESS INTEREST &/OR FINANCIAL CONNECTION	OF INTEREST OR CONNECTION
NA	NA	NA	NA
	71-31-12-13		
	A STATE OF THE STA		

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 relautive/s in the government service.

ADDRESS	TIONSHIP	NAME OF RELATIVE
VISAYAS STATE UNIVERSITY	STER	ALOM GRACE C. SUGANO
VISAYAS STATE UNIVERSITY	STER	ARLENE JOY S. BACSAN
	SIER	ARLENE JOY S. BACSAN

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: AUGUST 31, 2020		
Cd-		
(Signature of Declarant)	(Signature	e of Co-Declarant/Spouse)
Government Issued ID: PASSPOR	T Government Issu	ned ID: NA
ID No.: ECC7707674	ID No.:	NA
Date Issued: MAY 12, 2016	Date Issued:	NA
SUBSCRIBED AND SWORN to above-stated government issued iden		2020 affiant exhibiting to me the

RYSAN C GUINOCOR
(Person Administering Oath)