## SWORN STATEMENT OF ASSETS, LIABILITIES AND NET WORTH

As of <u>December 31, 2023</u> (Required by R.A. 6713)

Note	:: Husband and wife who	are both public offic nt Filing	ials and emplo			ed stateme pplicabl		parately.	
DECLARANT:	NAPOLES	HOMER	LOIS P.		POSITION:		Regis	strar II	
	(Family Name)	(First N	ame) (M.	[.)	AGENCY/OFFICE:		Visayas State University		
ADDRESS:	Gabas	3.1			OFFICE ADDRESS:		Visca, Baybay City, Leyte		
	Baybay City, Leyte								
SPOUSE:	NAPOLES	JANE			POSITION: AGENCY/OFFICE: OFFICE ADDRESS:		Branch Operation Supervisor I		
	(Family Name)	(First N	ame) (M.				Eight Under Par		
ADDRESS:	Casao						Puerto Princesa City, Palawan		
	Bontoc, Southern Leyte								
NAME  NAME  DATE OF BIRTH  JUSTIN HOLMES C. NAPOLES  December 30, 2014  JANNU LOUIS C. NAPOLES  March 18, 2020  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	KIND	EXACT	ASSESSED	CURI	RENT FAIR	ACQ	ACQUISITION ACQUISITION		
(e.g. lot, house and lot, condominium	(e.g. residential, commercial, industrial,	LOCATION	VALUE	THE LEGISLANDS	KET VALUE			COST	
and improvements)	agricultural and mixed use)		(As found in the Tax Declaration of Real Property)		YEAR	MODE			
b. Personal Properties*						N.A.			
DESCRIPTION					YEAR ACQUIRED ACQUISITION		ACQUISITION		

DESCRIPTION	YEAR ACQUIRED	ACQUISITION COST/AMOUNT
Gadgets and Accessories	2016 - 2022	P 265,858.00
Appliances	2019 – 2022	55,600.00
Motorcycle	2019	66,000.00
Clothing	2020 - 2022	10,500.00
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Subtotal: P 397,958.00

TOTAL ASSETS (a+b): P 397,958.00

<sup>\*</sup> Additional sheet/s may be used, if necessary.

## 2. LIABILITIES\*

NATURE	NAME OF CREDITORS	OUTSTANDING BALANCE
Personal Loan	vsucc	P 1,068,232.80
Loans	GSIS, Pag-IBIG	76,199.59
Life Plan	St. Peter Life Plan	3,625.00
Mortgage	Palawan Pawnshop	139,400.00

TOTAL LIABILITIES:

P 1,287,457.39

NET WORTH: Total Assets less Total Liabilities =

(P 889,499.39)

## BUSINESS INTERESTS AND FINANCIAL CONNECTIONS

(of Declarant's spouse/ Unmarried Children Below Eighteen (18) years of Age Living in Declarant's Household)  $\Box$  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
VSUCC	VSU, Baybay City, Leyte	COOPERATIVE	JUNE 2016
SBMPC	Saint Bernard, Southern Levte	COOPERATIVE	OCTOBER 2023

## 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
HENRY M. NAPOLES	Father	Agriculturist	LGU – Albuera, Leyte
EVARISTO M. VALENZONA	Uncle-in-Law	Security Guard	LGU – Baybay City, Leyte
EDGAR M. NAPOLES	Uncle	Agriculturist	LGU - Aloguinsan, 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 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: April 4, 202	23					
	Hy L		Shel			
(Sigr	nature of Declarant)	(Signature o	(Signature of Co-Declarant/Spouse)			
Government Issued ID: ID No.: Date Issued:	DRIVER'S LICENSE H12-10-001764 11-26-2021	Government Issued ID: ID No.: Date Issued:	UNITED MULTI-PURPOSE ID CRN-0111-4252996-9			
SUBSCRIBED AN government issued idea	<b>D SWORN</b> to before me that the ntification card.	affiant of the state of the sta	exhibiting to me the above-stated			

(Person Administering Oath)

<sup>\*</sup> Additional sheet/s may be used, if necessary.