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

## SWORN STATEMENT OF ASSETS, LIABILITIES AND NET WORTH

As of December 31, 2019

(Required by R.A. 6713)

	• • • • • • • • • • • • • • • • • • • •	_		, ,,	one requirement	•	intly or separately.	
	Joint Filing		Separate Filing	X	Not Applicable			
DECLARANT:	DE PADI	JA, ELD			POSITION:	INST	RUCTOR 1	
	(Family Name)	(First Name)	(M. I.)		AGENCY/OFFICE	VISA	YAS STATE UNIVERSITY	
					OFFICE ADDRESS		GASUGAN, BAYBAY	
ADDRESS	PANGASUGAN, BAY	BAY CITY, LEY	re			CITY		
BPOUSE:		N/A			POSITION:	N/A		
J. 0002.	(Family Name) (First Name) (M. I.)		AGENCY/OFFICE:					
				OFFICE ADDRESS: N/A				
UNMARRIE	D CHILDREN BE	CLOW EIGH	ΓΕΕΝ (18) YEAR	S OF AGE	LIVING IN DEC	ARAN	r's household	
NAME			DATE OF BIRTH		AGE			
	N/A				N/A		N/A	
		ASSET	S, LIABILITIES	AND NETW	ORTH			
1. ASSETS a. Real Prope	rties*	of age i	living in declaran	t's househol	(d)			
DESCRIPTION	KIND	EXACT LOCATION	Assessed Value	CURRENT PAIR MARKET	ACQUISITIO	) N	ACQUISITION COST	
(e.g. lot, house and lot condominism and improvements)	(e.g.residential, commercial, industrial, agricultural and mixed use)		(As found in the Tex I Real Proper		YEAR H	ODE		
**								
None								
None  b. Personal P	roperties*				Subt	otal: P	-	
	roperties* DESCRIP1	CION		Y	Subt	otal: P	ACQUISITION COST/	
b. Personal P		CION		Y		otal: P	AMOUNT	
<b>b. Personal P</b> Laptop		<b>PION</b>		<b>Y</b>	EAR ACQUIRED	otal: P	AMOUNT 20,000.0	
b. Personal P  Laptop  Cellphone		PION		<b>Y</b>	EAR ACQUIRED	otal: P	20,000.0 4,000.0	
b. Personal P  Laptop  Cellphone		PION		<b>Y</b>	2017 2017 2018	otal: P	20,000.00 4,000.00 5,000.00	
b. Personal P  Laptop  Cellphone  Printer	DESCRIP	PION			2017 2017 2018	otal: P	20,000.0 4,000.0 5,000.0 29,000.0	
b. Personal P  Laptop  Cellphone  Printer	DESCRIP				2017 2017 2018 Subt	otal: P (a + b):	20,000.00 4,000.00 5,000.00 29,000.00	
b. Personal P  Laptop  Cellphone  Printer	DESCRIP				2017 2017 2018 Subt	otal: P (a + b):	20,000.00 4,000.00 5,000.00 29,000.00 29,000.00	
b. Personal P  Laptop  Cellphone  Printer	DESCRIPT				2017 2017 2018 Subt TOTAL ASSETS	otal: P (a + b):	20,000.00 4,000.00 5,000.00 29,000.00 29,000.00 00TSTANDING BALANCE	

## BUSINESS INTERESTS AND FINANCIAL CONNECTIONS

NAME OF ENTITY/BUSINESS ENTERPRISE	BUSINESS ADDRESS	NATURE OF BUSINES INTEREST &/OR FINANCIAL CONNECTS	ACQUISITION OF	
N/A	N/A	N/A	N/A	
	RELATIVES IN THE GOV	ERNMENT SERVICE		
	Degree of Consanguinity or Aj	1311W KS 88 W 81	dae and Incol	
	I/We do not know of any	· · · · · · · · · · · · · · · · · · ·		
V DECLARANT A HOUSEHOLD	LONIAL ADA TO BARE Y	SHMARKIED CHILDREN BELOW ELCHTER VILLE LAN		
NAME OF RELATIVE	RELATIONSHIP	POSITION	OF AGENCY/OFFICE ANI ADDRESS	
None	Ermow ras Bua am ins	MASSIS MA		
business interests and imanci	al connections, including th		liabilities, net worth, married children below	
eighteen (18) years of age livin	g in my household, and tha	nose of my spouse and un at to the best of my knowl	married children below edge, the above-	
eighteen (18) years of age living enumerated are names of rela  I hereby authorize the from all appropriate government may show my assets, liabilities my spouse and unmarried chi	ig in my household, and the tives in the government wi e Ombudsman or his/her de ent agencies, including the s, net worth, business inter- ldren below 18 years of age	nose of my spouse and un at to the best of my knowl thin fourth civil degree of ally authorized representa Bureau of Internal Reven rests and financial connec- living with me in my hou	married children below edge, the above- f consanguinity or affini ative to obtain and secu ue such documents that tions, to include those of	
eighteen (18) years of age living enumerated are names of relative authorize the from all appropriate governments as show my assets, liabilities my spouse and unmarried chily years to include the year I first	ig in my household, and the tives in the government wi e Ombudsman or his/her de ent agencies, including the s, net worth, business inter- ldren below 18 years of age	nose of my spouse and un at to the best of my knowl thin fourth civil degree of ally authorized representa Bureau of Internal Reven rests and financial connec- living with me in my hou	married children below edge, the above- f consanguinity or affini- ative to obtain and secu- ue such documents tha ctions, to include those of	
eighteen (18) years of age living enumerated are names of relandaries.  I hereby authorize the from all appropriate governments may show my assets, liabilities my spouse and unmarried children.	ig in my household, and the tives in the government wi e Ombudsman or his/her de ent agencies, including the s, net worth, business inter- ldren below 18 years of age	nose of my spouse and un at to the best of my knowl thin fourth civil degree of ally authorized representa Bureau of Internal Reven rests and financial connec- living with me in my hou	married children below edge, the above- f consanguinity or affini- ative to obtain and secu- ue such documents tha ctions, to include those of	
I hereby authorize the from all appropriate governme may show my assets, liabilities my spouse and unmarried chilyears to include the year I firs	ig in my household, and the tives in the government wi e Ombudsman or his/her de ent agencies, including the s, net worth, business inter- ldren below 18 years of age	nose of my spouse and un at to the best of my knowl thin fourth civil degree of ally authorized representa Bureau of Internal Reven rests and financial connec- living with me in my hou	married children below edge, the above- f consanguinity or affini- ative to obtain and secu- ue such documents tha ctions, to include those of	
I hereby authorize the from all appropriate governme may show my assets, liabilities my spouse and unmarried chi years to include the year I firs  Date:  9-Jun-20	ig in my household, and the tives in the government with the combudsman or his/her dent agencies, including the state worth, business interested below 18 years of agent assumed office in government.	nose of my spouse and un at to the best of my knowl thin fourth civil degree of ally authorized representa Bureau of Internal Reven rests and financial connec- living with me in my hou- ment.	married children below edge, the above- f consanguinity or affinitive to obtain and secure such documents that tions, to include those esehold covering previous	
I hereby authorize the from all appropriate governme may show my assets, liabilities my spouse and unmarried chi years to include the year I first Date:  9-Jun-20  Signature of Declarations	g in my household, and the tives in the government with the combudsman or his/her dent agencies, including the state of th	nose of my spouse and unat to the best of my knowlethin fourth civil degree of all authorized representations. Bureau of Internal Reventests and financial connectiving with me in my hounent.  N/4  (Signature of Co-Declarance)	married children below edge, the above- f consanguinity or affinitive to obtain and secure such documents that tions, to include those of sehold covering previous	
I hereby authorize the from all appropriate government and unmarried chi years to include the year I first Date:  9-Jun-20  Government Issued II Agency ID ID No.:  V00930 Date Issued:  9/6/2016	g in my household, and the tives in the government with the combudsman or his/her dent agencies, including the state of th	nose of my spouse and un at to the best of my knowl thin fourth civil degree of all authorized represents Bureau of Internal Reventests and financial connectiving with me in my hounent.  No.:	married children below edge, the above- f consanguinity or affini ative to obtain and secu- ue such documents the ctions, to include those sehold covering previou	
I hereby authorize the from all appropriate government and unmarried chi years to include the year I first Date:  9-Jun-20  Government Issued II Agency ID No.:  V00930	g in my household, and the tives in the government with the combudsman or his/her dent agencies, including the state of th	nose of my spouse and unat to the best of my knowlethin fourth civil degree of all authorized representates and financial connectiving with me in my houment.  N/4  (Signature of Co-Declarance ernment Issued ID:	married children belowedge, the above- f consanguinity or affinative to obtain and secure such documents the tions, to include those sehold covering previous	
I hereby authorize the from all appropriate government way show my assets, liabilities my spouse and unmarried chi years to include the year I first Date:  9-Jun-20  Government Issued II Agency ID ID No.:  V00930  Date Issued:  9/6/2016	g in my household, and the tives in the government with the combudsman or his/her dent agencies, including the state of th	nose of my spouse and unat to the best of my knowlethin fourth civil degree of all authorized representates and financial connectiving with me in my houment.  N/4  (Signature of Co-Declarance ernment Issued ID:	married children belowedge, the above- f consanguinity or affinative to obtain and secure such documents the tions, to include those sehold covering previous	