SWORN STATEMENT OF ASSETS, LIABILITIES AND NET WORTH

As of **December 31, 2020**

(Required by R.A. 6713)

Note: Hus	band and wife who	o are both public	officials and empl	oyees may file ti	he required stater	nents join	tly or separately.	
	Joint Filing		Separate Filing	g 🛮	Not Applicabl	е		
DECLARANT:	BANZON	JOAN ROSE	MARIE A.		POSITION:	ADN	MINISTRATIVE AIDE IV	
	(Family Name)	(First Name)	(M. I.)		AGENCY/OFFICE		VISAYAS STATE UNIVERSITY	
					OFFICE ADDRES		CA, BAYBAY CITY, LEYTE	
ADDRESS	BRGY. CAGB	UHANGIN, O	RMOC CITY					
SPOUSE:	BANZON	JUN CAR	LO P.		POSITION:	ADN	IINISTRATIVE AIDE I	
	(Family Name)	(First Name)	(M. l.)	_	AGENCY/OFFICE		ORMOC CITY LGU	
					OFFICE ADDRESS:	s: ORM	NOC CITY, LEYTE	
UNMARR	HED CHILDREN	BELOW EIGHT	reen (18) yeai	RS OF AGE LI	VING IN DECL	ARANT'S	S HOUSEHOLD	
		NAME			DATE OF B	IRTH	AGE	
	CRYSTAL RAVEN A. BANZON				July 9, 20	13		
	CARLOS SANTINO A. BANZON					, 2011	9	
				_				
1. ASSETS a. Real Prope	-	e of the spouse	S, LIABILITIES and unmarried ving in declarant	children belou		ears of		
				CURRENT				
DESCRIPTION	KIND	EXACT LOCATION	ASSESSED VALUE	FAIR MARKET	ACQUISITION		ACQUISITION COST	
(e.g. lot, house and lot	(e.g.residential,		(As found in the T	VALUE ax Declaration of	ร ได้โดยได้เรียกให้เกี่ยวเลย เกียร์เกิดเรียกเลย			
condominium and improvements)	commercial, industrial, agricultural and mixed		Real Pr	operty)	YEAR	MODE		
NONE								
					Sub	total: P	•	
b. Personal P	roperties*							
8.81.25254	DESCRI	PTION		Ÿì	EAR ACQUIRED		ACQUISITION COST/	
MOTORCYCLE					2009	60,000.0		
					···			
								
					0-1	4-4-1. 7	60,000.0	
				,	Sub TOTAL ASSET!	total: P		
2. LIABILITIES*	•			•	IOIAL ASSEI	o (a + b).		
	NATU	RE		NAM	E OF CREDITOR	S.	OUTSTANDING BALANCE	
MPL	de reffsi vir julion frailis	territati salah dari salah dari		GSIS			219,945.1	
Multipurpose Loai	n			PAG-IBIG	<u> </u>		9,669.6	
				LANDBANK			108,023.0	
LBP-SAL								
LBP-SAL								
LBP-SAL					TOTAL LIABI	LITIES:	337,637.8	

BUSINESS INTERESTS AND FINANCIAL CONNECTIONS

NAME OF ENTITY/BUSINESS ENTERPRISE	BUSINESS ADDRES	s INTER	OF BUSINESS EST &/OR CONNECTION	INTEREST OR	
NONE					
(Within the Fourth I	RELATIVES IN THE GO Degree of Consanguinity of an	or Affinity. Include al	lso Bilas, Balae a		
NAME OF RELATIVE	RELATIONSHIP	POSITION	NAME OF AGENCY/OFFICE AND ADDRESS		
ONE					
	1-23				
I hereby certify that the pusiness interests and financial eighteen (18) years of age living enumerated are names of related. I hereby authorize the from all appropriate governmentary show my assets, liabilities my spouse and unmarried chilly years to include the year I first	al connections, including in my household, and ives in the government. Ombudsman or his/hant agencies, including its, net worth, business indeed the dren below 18 years of	ng those of my spo that to the best of within fourth civi- er duly authorized the Bureau of Inte- nterests and final age living with m	ouse and unmand in my knowledge il degree of condition of the condition of	erried children belove, the above- sanguinity or affine to obtain and secunds documents that as, to include those	
Date: April 12, 2021					
Alban					
(Signature of Declara	nt)	(Signature o	f Co-Declarant/S	pouse)	
Government Issued ID: VSU ID D No.: V000570 Date Issued: November	1	Government Issued ID No.: Date Issued: 3 APR 2021	0111-38485		
SUBSCRIBED AND SWO	RN to before me this	day of	2020 affiant	exhibiting to me th	