SWORN STATEMENT OF ASSETS, LIABILITIES AND NET WORTH

As of <u>JUNE 09</u>, 2025 (Required by R.A. 6713)

Note: Husband and wife who are both public officials and employees may file the required statements jointly or separately.

☐ Joint Filing ☐ Separate Filing ☐ Not Applicable

DECLARANT:	VEGA	CARLOS	М.	POSITION:	ADMIN. AIDE VI (CLERK III)	
62.681	(Family Name)	(First Name)	(M.I.)	AGENCY/OFFICE:	BUDGET OFFICE	
ADDRESS:	BRGY. BUNGA,	BAYBAY CITY,	LEYTE,	OFFICE ADDRESS:	VISAYAS STATE UNIVERSITY	
_				sused, if necessary.	PANGASUGAN, BAYBAY, LEYTE	
SPOUSE:	N/A			POSITION:	N/A	
	(Family Name)	(First Name)	(M.I.)	AGENCY/OFFICE:		
	ge Living to Pedarant's Hou	The garrene (81) we wish	ddiren Belmine's	OFFICE ADDRESS:		
		2				

UNMARRIED CHILDREN BELOW EIGHTEEN (18) YEARS OF AGE LIVING IN DECLARANT'S HOUSEHOLD

NAME AV	DATE OF BIRTH	AGE V
CARLOS ALEXANDER B. VEGA	07/26/2013	12
CHARLES OLSEN B. VEA	11/01/2014	10
CARLSON YAEL B. VEGA	10/01/2022	2
Olithoott IIIbb b. Vbdii	10/01/2022	

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 (e.g. lot, house and lot, condominium	KIND (e.g. residential,	EXACT LOCATION	ASSESSED VALUE	CURRENT FAIR MARKET VALUE	ACQ	UISITION	ACQUISITION COST	
and improvements)	commercial, industrial, agricultural and mixed use)		(As found in the Tax Declaration of Real Property)		YEAR MODE			
N/A	A/N ts, habilities,	A\N tatements of my asse	N/A	A/N	N/A tent	N/A	A/N	
wolad rica	unmarried chile	se of my spouse and	nči i,ding th	connections	nancia	î bas et	businesa intere	
ne above		that to the best of the	blie blode	ig in my hous	go livia	s lo emer	eighteen (18)	
to vaniing	ceree of consat	with the fourth civil c	r Instanton	atives in the so	91 7/11/1	names o	enumerated are	
							alünity	
bus nieto	esentative to o	duly authorized repr	or bis/he	e Ombudsman	Prize fl	dick wist	od I - i i - i	
านัด รมเปา	Internal Revo	ding the Bureau of	icies, inclu	syermment nge	late s	детады п	secure from a	
mections,	id financial co	, business interests a	act worth	issets, liabilitie	w my a	t may shr	documents tha	
ae in my	e living with	below 18 years of ag	naublida be	risianu bas s	sisoas	se of my	to include the	

Subtotal:

b. Personal Properties*

DESCRIPTION	YEAR ACQUIRED	ACQUISITION COST/AMOUNT	
CLOTHING (settoge(transples) of the transples)	VARIOUS YEARS	7,000.00	
SHOES AM COLDSites Instrument O.	maley 2024: Island 2011	3,000.00	
CELLPHONE	2021	16,000.00	
LAPTOP	2023	6,000.00	

Subtotal: 32,000.00

TOTAL ASSETS (a+b): 32,000.00

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

2. LIABILITIES*

NATURE	NAME OF CREDITORS	OUTSTANDING BALANCE
Pag-ibig Loan	HDMF	8,280.04
Consolidated Loan	SSS	13,929.77
statements jointly on separately	me both flublic officials and ent layoes may file to required	Note: Firshaud with de who a
nogale	idy jon is - Buille approprie Bribe i	1910 C LJ

TOTAL LIABILITIES: 22,210.21

NET WORTH: Total Assets less Total Liabilities =

9,789.79

BUSINESS INTERESTS AND FINANCIAL CONNECTIONS

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

If 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	HTMN/ATTAC	N/A	N/A	
. 12	. 07/20/2013	KANDER B. VECO.	CARLOS ALH	
	THE STATE OF THE S	UISER D VEA	CILIANU	
	5503 10:01	AOOV O Juni		

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 N/A	POSITION N/A	NAME OF AGENCY/OFFICE AND ADDRESS N/A		
N/A					
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TEOO	MUJAVIO, MA	antiav	Official Sections of Section 2		
	ST TO BE THE TOTAL	alike isa	in the let expens for all the feet		

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:	07/24/2025	No. of Oliverial				
TRUDURATEON P.		N/A				
00.000,7 (Signa	ature of Declarant)	(Signature of Co-Declarant/Spouse)				
Government Issued ID:	Social Security System	Government Issued ID:	N/A	HOES		
ID No.:	07-1752951-5	ID No.:	CITAL	CALIGITATION		
Date Issued:	10-17-2005	Date Issued:		901924		

SUBSCRIBED AND SWORN to before me this 26th day of _____, affiant exhibiting to me the above-stated government issued identification card.

ATTY. KAREN ABEGAIL S. MONTERON (Person Administering Oath)

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