SWORN STATEMENT OF ASSETS, LIABILITIES AND NET WORTH

As of December 2018~31 (Required by R.A. 6713)

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

		Joint Filing	0	Separate Filing	4	Not Applicable	
DECLARANT:		RAMOS	ARSENIO	D.		POSITION:	Asso. Prof IV
		(Family Name)	(First Name)	(M. I.)		AGENCY/OFFICE:	Visayas State University
						OFFICE ADDRESS:	Visayas State University
ADDRESS		Visayas Sta	te University, \	/isca	3/3/		Visca, Baybay City, Leyte
		Baybay City, Le	yte		_		
SPOUSE:		RA MOS	ELISA	0.		POSITION:	Housekeeper
		(Family Name)	(First Name)	(M. I.)	-	AGENCY/OFFICE:	N/A
						OFFICE ADDRESS:	N/A
UNM	ARE	RIED CHILDRE	N BELOW EIGHT	EEN (18) YEARS	OF AGE LI	VING IN DECLAR	ANT'S HOUSEHOLD TH AGE
		No	one			N/A	N/A

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 LOCATION	ASSESSED VALUE	CURRENT FAIR MARKET VALUE	ACQU	ISITION	ACQUISITION COST
(e.g. lot, house and lot condominium and improvements)	(e.g.residential, commercial, industrial, agricultural and mixed		(As found in the Tax D Real Proper		YEAR	MODE	
Lot- 1,383 sqm	Agricultural	Brgy. Lamak, Hilogos, Levte	1,590.00	400,000.00	2018	Cash	387,240.00
-543W1.	o septome	760 A 10 6	Carringly mario	ronie na) 15 a 21	10000	
190	do me data	cul conductes		All of the state of			North Tall Control Tall

Subtotal: P

387,240.00

b. Personal Properties*

DESCRIPTION	YEAR ACQUIRED	ACQUISITION COST/ AMOUNT
Furniture	2004 and 2009	26,000.00
Oven (gas)	2018	40,000.00
Motorcycle (Kawasaki, Aura)	2003	33,390.00
Multicab	2015	130,000.00
Refigerator, chiller, freezer, food processors	1998, 2006, 2017, 2018	50,000.00
Bank accounts	2005 to 2018	800,000.00
Equity in isntallment purchase	2005 to 2010	200,000.00
Private Insurance	2017 to 2018	100,000.00

Subtotal: P

1,379,390.00

TOTAL ASSETS (a + b):

1,766,630.00

2. LIABILITIES*

STEELING STATES NATURE 105		NAME OF CREDITORS	OUTSTANDING BALANCE	
	: 1/2	a municipal parameter of the second	17 - 100 Laur 2 - 100	
None	and the same	N/A		
	The state of the branch of the state of			
	San Art Property and			

TOTAL LIABILITIES:

N/A

BUSINESS INTERESTS AND FINANCIAL CONNECTIONS

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

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
None	N/A	N/A	N/A
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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.

NAME OF RELATIVE	RELATIONSHIP	POSITION	NAME OF AGENCY/OFFICE AND ADDRESS
Liza R. Castrudes	Sister	Elem. School teacher	Guintoylan Elem School, Liloan, So. Leyte
Emelinda O. Dumalag	Sister in Law	Elem. School teacher	Hilongos Central School, Hilongos, Leyte

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.

		Porum	ue-
(Signature	of Declarant)		Co-Declarant/Spouse)
overnment Issued	VSU ID	Government Issued	Philhealth
No.:	V000440	ID No.:	13-025006298-3
ate Issued:		Date Issued:	1/5/2001
) No. :		ID No.:	13-025006298-3