SWORN STATEMENT OF ASSETS, LIABILITIES AND NET WORTH

As of July 31, 2021

(Required by R.A. 6713)

Note: H	usband and wife wh Joint Filing	o are both public o	fficials and employers Separate Filing	ees may file th	e required statement Not Applicable	s jointly or separately.
in the second		55	Separate Fung		site absorbs on a Sec.	magnetic control representation of the SMS
DECLARANT:	GAYANILO	MA. FE	(M. I.)		POSITION:	Admin. Aide IV
	(Family Name)	(First Name)	(M. 1.)		AGENCY/OFFICE:	ODAHRD-VSU
					OFFICE ADDRESS:	Visca, Baybay City, Leyte
ADDRESS	Kanlaon Graduate Dorm, Visca,					
	Baybay City,	Leyte		ordine to see the		
SPOUSE:	GAYANILO	JOEY	G.		POSITION:	Inventory Coordinator
		(First Name)		AGE	AGENCY/OFFICE:	SACO
					OFFICE ADDRESS:	Riyadh, Saude Arabia
	NONE	NAME			DATE OF BIR	TH AGE
	16. The section 1.00	ASSETS	S, LIABILITIES A	ND NETWO	RTH	
	(Including those	3	nd unmarried chil g in declarant's he		ighteen (18) years	of age
1. ASSETS						
a. Real Prop	erties*					
DESCRIPTION	KIND	EXACT	ASSESSED	CURRENT FAIR MARKET	ACQUISITION	

(e.g. lot, house and lot condominium and improvements)	KIND (e.g.residential, commercial, industrial, agricultural and mixed	EXACT LOCATION	ASSESSED VALUE	FAIR MARKET VALUE	ACQU	ISITION	ACQUISITION COST	
			(As found in the Tax Declar Real Property)		YEAR	MODE		
None	CARL THE COLUMN	in spires	rate sisaatus		12		y a part of a	

Subtotal: P

b. Personal Properties*

DESCRIPTION	YEAR ACQUIRED	ACQUISITION COST/ AMOUNT 50,000.00	
Fixed Deposit (VSUCC)	2021		
TV & signal	2013	17,600.00	
Refrigerator & Aircon	2017	16,000.00	
jewelries	2015-2020	45,000.00	
Tricycle	2016	101,000.00	
Cell Phone/Tablet	2016 & 2019	55,000.00	
Clothing	2019	70,000.00	

Subtotal: P

354,600.00

TOTAL ASSETS (a + b):

354,600.00

2. LIABILITIES*

NATURE	NAME OF CREDITORS	OUTSTANDING BALANCE
CONSOL	GSIS	85,000.00
HELP	GSIS	65,000.00
REGULAR LOAN	VISCCO	57,430.76
EAL	GSIS	5,850.09

TOTAL LIABILITIES:

213,280.85

NETWORTH: Total Assets Less Total Liabilities =

(141, 319.15)

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

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. DATE OF NATURE OF BUSINESS NAME OF ENTITY/BUSINESS ACQUISITION OF INTEREST &/OR **BUSINESS ADDRESS** INTEREST OR ENTERPRISE FINANCIAL CONNECTION CONNECTION NONE 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 AGENCY/OFFICE AND POSITION NAME OF RELATIVE RELATIONSHIP ADDRESS Valeriano Gatuslao, Memorial Hospital LEAH L. MOCON Sister **Chief Nurse** RENATO L. LIMSIACO, JR. Brother Senior Vice President, PhilHealth, Main Office **Fund Management** Sector **MELANY L. CALAMBA** Sister CHO, Himamaylan City, Neg. Occ. Nurse 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 aboveenumerated 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.

Date:	August 2, 2021	
	MA. FEL GAYANILO	
	(Signature of Declarant)	(Signature of Co-Declarant/Spouse)
	- st-relien	
Governn	nent Issued ID VSU ID	Government Issued ID:
ID No.:	V000626	ID No.:
Date Iss	ued:	Date Issued:
St above-s	JBSCRIBED AND SWORN to beforestated government issued identific	re me this 0 6 day of 2021 2021 affiant exhibiting to me the ation card. RYSAN C. GUINOCOR
		Page 2 of (Person Administering Oath)