SWORN STATEMENT OF ASSETS, LIABILITIES AND NET WORTH

As of <u>December 31, 2021</u>

(Required by R.A. 6713)

	•		ciais and employees m	ay file the required statemen	w journg or copus	weig.
	Joint Filing		Separate Filing	♦ Vot Applicable		
DECLARANT:	ALACIO	WELLA MARIE	D	POSITION:	INSTRUCTOR 1	
	(Family Name)	(First Name)	(M. I.)	AGENCY/OFFICE:	DBM	
				OFFICE ADDRESS	VISAYAS STATE	UNIERSITY
ADDRESS	BRGY. HIPL	JSNGO, BAYBA	Y CITY,		VISCA, BAYBAY	CITY, LEYTE
	LEYTE, 652	1, PH			6521-A, PH	
SPOUSE:	N/A			POSITION:	N/A	
	(Family Name)	(First Name)	(M. I.)	AGENCY/OFFICE:	N/A	
				OFFICE ADDRESS	N/A	
UNMARRI	ED CHILDREN	i BELOW EIGHTEI NAME N/A	en (18) years of a	AGE LIVING IN DECLAR DATE OF BIR' N/A		AGE N/A
			Liabilities and r	VETWODTH		

a. Real Properties*

DESCRIPTION	KIND	EXACT LOCATION	ASSESSED VALUE	CURRENT FAIR MARKET VALUE	ACC	NOITHBIUG	Acquisition cost
(e.g. lot, house and lot condominium and improvements)	(e.g.residential, commercial, industrial, asticultural and mixed		(As found in the Tax I Real Prope		YEAR	MODE	
LOT	RESIDENTIAL	BRGY. HIPUSNGO BAYBAY CITY, LEYTE	25,350.00	126,755.86	2019	INHERITANCE	500,000.00
HOUSE	RESIDENTIAL	BRGY. HIPUSNGO BAYBAY CITY, LEYTE	231,630.00	772,085.81	2019- 2021	CASH	1,410,000.00

Subtotal: P 1,910,000.00

b. Personal Properties*

DESCRIPTION	YEAR ACQUIRED	ACQUISITION COST/ AMOUNT
PRULIFE UK INSURANCE	2021	3,000,000.00
CLOTHES AND SHOES	2017-2021	60,000.00
SONY STEREO	2021	20,000.00
LIVING ROOM SOFA	2021	36,000.00
JEWELRIES	2016-2021	90,000.00

3,206,000.00 Subtotal: P TOTAL ASSETS (a + b): _____5,116,000.00

2. LIABILITIES*

	NATURE STATE OF A STAT	NAME OF CREDITORS	Outstanding Balance
GSIS MULTIPURPOSE	LOAN	GSIS	96,000.00
CREDIT		RELATIVE	21,000.00
CREDIT (BOOKS)	~• * •••	PHILIPPINE PUBLISHING HOUSE	5,500.00
INSURANCE		PRULIFE	720,000.00
INSURANCE		MANULIFE	14,000.00
		MOMAY TTADITIMING	056 500 00

TOTAL LIABILITIES 856,500.00

NETWORTH: Total Assets Less Total Liabilities =

4,259,500.00

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	NATURE OF BUSINESS INTEREST &/OR FINANCIAL CONNECTION	DATE OF ACQUISITION OF INTEREST OR CONNECTION
N/A	N/A	N/A	N/A
SHE MA ELOPETCH: NIA ADDRESS NA	POSIDE	(3 M. mad and).	(one Myland)

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 relavtive/s in the government service.

NAME OF RELATIVE	RELATIONSHIP	POSITION	NAME OF AGENCY/OFFICE AND ADDRESS
N/A	N/A	N/A	N/A
полинор	SA TARRAM	daesses A	ON RIND LOCATION
3008	BART Land School Co.	Tail no fetter eng	position for the second

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.

Date: 2/2	1 /00		
Date: 3/3	1/22		
UUL000;::	2021		
00.000,00	2016 2021		
(Signature	e of Declarant)	(Signature of Co-Declar	ant/Spouse)
3,208,000,00	Subtotal: F		
Government Issued	PASSPORT		
ID No.:	P4247745B	-	1831
Date Issued:	18/12/2019	U 1 APR 2022	G271 (4) 2537
SUBSCRIBET	AND SWORN to before me this		2022, affiant
	e above-stated government issu		
	Parameter Postus Have House	Algen	IINOCOR
	[96,1159]	(Person Administer	
	Nardren	(LEI 2011 MONTHARBERT)	ilg Galli)