

SWORN STATEMENT OF ASSETS, LIABILITIES AND NET WORTH

As of December 31, 2019

(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:	REBUYAS	BRYAN	P.	POSITION:	DRIVER/CANVASSE
	(Family Name)	(First Name)	(M.I.)	AGENCY/OFFICE:	VSU
ADDRESS:	FARMERS' VILLAGE, VSU, BAYBAY CITY,			OFFICE ADDRESS:	BAYBAY CITY,
	LEYTE, 6521-A				LEYTE, 6521-A
SPOUSE:	REBUYAS,	JUZYNE JANE	L.	POSITION:	INSTRUCTOR
	(Family Name)	(First Name)	(M.I.)	AGENCY/OFFICE:	VSU
				OFFICE ADDRESS:	BAYBAY CITY

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

NAME	DATE OF BIRTH	AGE
JOULES BRIANNE L. REBUYAS	Aug. 21, 2017	2 years & 10 months

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 and improvements)	KIND (e.g. residential, commercial, industrial, agricultural and)	EXACT LOCATION	ASSESSED VALUE (As found in the Tax Declaration of Real Property)	CURRENT FAIR MARKET VALUE	ACQUISITION		ACQUISITION COST
					YEAR	MODE	
NONE							

Subtotal: -

b. Personal Properties\*

DESCRIPTION	YEAR ACQUIRED	ACQUISITION COST/AMOUNT
Electronic Gadgets (Laptop & Cellphone)	2015 - 2017	63,000.00
Total Station	2014	145,000.00
Home Appliances and Furniture	2016 - 2017	70,000.00
Motorcycle	2012	67,000.00

Subtotal: 345,000.00

TOTAL ASSETS (a+b): 345,000.00

\*Additional sheet/s may be used, if necessary.

**2. LIABILITIES\***

NATURE	NAME OF CREDITORS	OUTSTANDING BALANCE
Globe Plan	Globe Telecom	36,000.00
Life Insurance	Sun Life	64,000.00

**TOTAL LIABILITIES:** 100,000.00

**NET WORTH : Total Assets less Total Liabilities =** 245,000.00

\* 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's 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			

**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	POSITION	NAME OF AGENCY/OFFICE AND ADDRESS
Jaime M. Lasquites	Father in law	Security Guard	VSU
Heide S. Lasquites	Mother in law	Research Asst.	VSU
James Jade S. Lasquites	Brother in law	Asst. Professor	USEP

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: 11-Jun-20

(Signature of Declarant)

Government Issued ID: VSU ID  
ID No.: V00898  
Date Issued: Jan-16

(Signature of Co-Declarant/ Spouse)

Government Issued ID: VSU ID  
ID No.: V00802  
Date Issued: Aug-15

11 JUN 2020

**SUBSCRIBED AND SWORN** to before me this \_\_\_\_\_ day of \_\_\_\_\_, 2016,  
affiant exhibiting to me the above-stated government issued identification card.

ATTY. RYSA C. GUINOCOR  
(Person Administering Oath)