

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: ALBARICO ARMANDO P.
(Family Name) (First Name) (M. I.)

POSITION: ADM. ASST. III

AGENCY/OFFICE: VISAYAS STATE UNIVERSITY

OFFICE ADDRESS: VISCA, BAYBAY CITY, LEYTE

ADDRESS: 30 DE DICIEMBRE ST. ZONE 23
BAYBAY CITY, LEYTE

SPOUSE: ALBARICO RITA C.
(Family Name) (First Name) (M. I.)

POSITION: ADM. OFFICER

AGENCY/OFFICE: LEYTE INTEGRATED PORT SERVICES INC.

OFFICE ADDRESS: PORT AREA, BAYBAY CITY

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

NAME	DATE OF BIRTH	AGE

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 <small>(e.g. lot, house and lot, condominium unit, etc.)</small>	KIND <small>(e.g. residential, commercial, industrial, agricultural, etc.)</small>	EXACT LOCATION	ASSESSED VALUE	CURRENT FAIR MARKET VALUE	ACQUISITION		ACQUISITION COST
			<small>(As stated in the Tax Declaration of Real Property)</small>	<small>(As stated in the Tax Declaration of Real Property)</small>	YEAR	MODE	
HOUSE	RESIDENTIAL	30 DE DICIEMBRE ST. ZONE 23 BAYBAY CITY	50,000	100,000	1987	LOANS	50,000

Subtotal: P 50,000

b. Personal Properties*

DESCRIPTION	YEAR ACQUIRED	ACQUISITION COST/AMOUNT
MOTORCYCLE (HONDA)	2011	50,500
APPLIANCES, BOOKS, KITCHEN WARE, ETC.	1994-2019	75,000

Subtotal: P 125,500

TOTAL ASSETS (a + b): 175,500

2. LIABILITIES*

NATURE	NAME OF CREDITORS	OUTSTANDING BALANCE
LOANS	BSK	280,407.88
LOANS	SSS	5,152.20
LOAN	PA6-IBIG	6,955.60

TOTAL LIABILITIES: 292,515.68

NETWORTH: Total Assets Less Total Liabilities = -117,015.68

*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.

NAME OF ENTITY/BUSINESS ENTERPRISE	BUSINESS ADDRESS	NATURE OF BUSINESS INTEREST &/OR FINANCIAL CONNECTION	DATE OF ACQUISITION OF INTEREST OR CONNECTION
N/A	N/A	N/A	N/A

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
GENESIS C. ALBARICO	SON	INSTRUCTOR	VISAYAS STATE UNIVERSITY
ULYSES C. ALBARICO	SON	AGRICULTURIST	PHIL. COCONUT AUTHORITY
ARLYN A. GUINIPAN	COUSIN	ADM. AIDE	VISAYAS STATE UNIVERSITY

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 : May 27, 2020

(Signature of Declarant)

(Signature of Co-Declarant/Spouse)

Government Issued ID: DRIVER'S LICENSE

ID No. : H02-76-003855

Date Issued: JUNE 20, 2018

Government Issued ID: _____

ID No. : _____

Date Issued: _____

27 MAY 2020

SUBSCRIBED AND SWORN to before me this _____ day of _____ 20____, affiant exhibiting to me the above-stated government issued identification card.

ATTY. RYSA C. GUINOCOR
(Person Administering Oath)