SWORN STATEMENT OF ASSETS, LIABILITIES AND NET WORTH

As of 2022

(Required by R.A. 6713)

Note:	Husband and wife wh	no are both public official	ls and employee	es may file the required statemen	ts jointly or separately.
	☐ Joint Filing	☐ Sept	arate Filing	X Not Applicable	
DECLARANT:	CAPARAS	MERRY JEAN	Α.	POSITION:	INSTRUCTOR 1
	(Family Name)	(First Name) (N	M. I.)	AGENCY/OFFICE:	ISRDS, VSU
				OFFICE ADDRESS:	BRGY. PANGASUGAN,
ADDRESS	BRGY. CALU	NASAN, MERIDA,	LEYTE		VisCA, BAYBAY CITY
	- NA				
SPOUSE:	(Family Name)	(First Name) (N	M. I.)	POSITION:	NA
	(Tuning Traine)	(x mor x mmv)	,	AGENCY/OFFICE:	NA
				OFFICE ADDRESS:	NA
<u>UNMA</u>	NA	BELOW EIGHTEEN NAME	(18) YEARS (DF AGE LIVING IN DECLAR. DATE OF BIR	emitos
		ASSETS, LIA	ABILITIES AN	D NETWORTH	
	(Including those	•		en below eighteen (18) years	of age
		living in d	eclarant's hou	sehold)	
. 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 Real Prop		YEAR	MODE	
NONE					1		
							,

Subtotal: P

b. Personal Properties*

DESCRIPTION	YEAR ACQUIRED	ACQUISITION COST/ AMOUNT
LAPTOP	2022	50,000.00
PHONE	2021	15,000
CLOTHES	2022	15,000.00
SHOES	2022	20,000.00
JEWELRY	2022	15,000.00
SAVINGS	2022	30,000.00

Subtotal: P 130,000.00

TOTAL ASSETS (a + b): 130,000.00

2. LIABILITIES*

NATURE	NAME OF CREDITORS	OUTSTANDING BALANCE
NONE		

BUSINESS INTERESTS AND FINANCIAL CONNECTIONS

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

X I/We do not have any business interest or financial connection.

BUSINESS ADDRESS	NATURE OF BUSINESS INTEREST &/OR FINANCIAL CONNECTION	DATE OF ACQUISITION OF INTEREST OR CONNECTION
	BUSINESS ADDRESS	BUSINESS ADDRESS INTEREST &/OR

RELATIVES IN THE GOVERNMENT SERVICE

(Within the Fourth Degree of Consanguinity or Affinity. Include also Bilas, Balae and Inso)

X I/We do not know of any relavtive/s in the government service.

NAME OF RELATIVE	RELATIONSHIP	POSITION	NAME OF AGENCY/OFFICE AND ADDRESS

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: 31-M	ar-23	
M	agoy	
(Signature	of Declarant)	(Signature of Co-Declarant/Spouse)
Government Issued	PASSPORT	Government Issued
Government Issued	PASSPORT P2045699B	Government Issued ID No. :