Revised as of January 2015 Per CSC Resolution No. 1500088 Promulgated on January 23, 2015

# SWORN STATEMENT OF ASSETS, LIABILITIES AND NET WORTH

As of \_\_\_\_\_\_December 2015 (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: AURE, REV RHIZZA L.

(Family Name) (First Name) (M.I.)

ADDRESS: APT 66. KILBOURNE DRIVE

VISAYAS STATE UNIVERSITY, BAYBAY CITY

POSITION: AGENCY/OFFICE: OFFICE ADDRESS: INSTRUCTOR II
DMPS, CAS, VSU
BAYBAY CITY, LEYTE

SPOUSE:

AURE MA. RACHEL KIM L.
(Family Name) (First Name) (M.I.)

POSITION:
AGENCY/OFFICE:
OFFICE ADDRESS:

ASSISTANT PROFESSOR I
DTE, CE, VSU
BAYBAY CITY, LEYTE

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

NAME	DATE OF BIRTH	AGE
 ALIKA DANNIELLA L. AURE	DECEMBER 3, 2009	0
ALINA DOMINIQUE L. AURE	DECEMBER 26, 2015	3 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	(e.g. residential, commercial, industrial,	EXACT	ASSESSED CURRENT FAIR VALUE MARKET VALUE		ACQUISITION		ACQUISITION
and improvements)	agricultural and mixed use)		(As found in the Tax Declaration of Real Property)		YEAR	MODE	
LOT	agricultural	Brgy. Mag-aso, Baybay City, Leyte			2013	Cash	50,000.00

Subtotal:

50,000.00

## b. Personal Properties\*

DESCRIPTION	YEAR ACQUIRED	ACQUISITION COST/AMOUNT
Honda Motorcycle Model: 2005; Plate No. HI-3522	2008	20,000.00
Toyota Hi lux Model 1997; Plate No. UHT134	2015	50,000.00
Time Deposits	2013	140,000.00
Cash in Bank	2015	150,000.00
Jewelries	2014	60,000.00

Subtotal: 420,000.00

TOTAL ASSETS (a+b): 470,000.00

## 2. LIABILITIES\*

NATURE	NAME OF CREDITORS	OUTSTANDING BALANCE
Consolidated loan	GSIS	20,000.00
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TOTAL LIABILITIES: 20,000.00

NET WORTH: Total Assets less Total Liabilities = 450,000.00

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

#### **BUSINESS INTERESTS AND FINANCIAL CONNECTIONS**

(of 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
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
ATTY. MYRA BELLE L. AURE	SISTER-IN-LAW	PUBLIC ATTORNEY	PAO/BAYBAY CITY, LEYTE
MYRA V. AURE	AUNT	TEACHER	DEPED/BRGY. BUNGA, BAYBAY CITY, LEYTE
JINGLE L. MATALINES	COUSIN	TEACHER	DEPED/BRGY. BUNGA, BAYBAY CITY, LEYTE
ROSALIA CASTRO	AUNT	TEACHER	DEPED/BRGY. BUNGA, BAYBAY CITY, LEYTE
LUCILLE TABROSA	COUSIN	ADMIN AIDE	VSU/BAYBAY CITY, LEYTE

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.

	Jan 1	A	alphille		
(Signature of Declarant)		(Signature)	(Signature of Co-Declarant/Spouse)		
Government Issued ID:	GSIS UMID	Government Issued ID:	GSIS UMID		
ID No.:	006-0017-7290-4	ID No.:	006-0017-6383-2		
Date Issued:		Date Issued:			
SUBSCRIBED AN		isda <b>SEB</b> f (1 9 20,16affiant o	exhibiting to me the above-state		

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BOOK NO. 1

SERIES OF 2016

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