# SWORN STATEMENT OF ASSETS, LIABILITIES AND NET WORTH

As of December 31, 2018

(Required by R.A. 6713)

ECLARANT:	ARCE	LISA	I.	POSITION:	Instructor I
	(Family Name)	(First Name)	(M.I.)	AGENCY/OFFICE:	PhilRootcrops
DDRESS:	187 Brgy. Alejos	Bato, Leyte		OFFICE ADDRESS:	VSU, Baybay City, Leyte
					***
POUSE:	N/A			POSITION:	N/A
	(Family Name)	(First Name)	(.I.M)	AGENCY/OFFICE:	N/A
				OFFICE ADDRESS:	N/A
UNMADDI	ED CHII DDEN DE	V OW BLOWS	40.774		
UNMARRI			(18) YEAR:	S OF AGE LIVING IN	DECLARANT'S HOUSEHO
UNMARRI	ED CHILDREN BE  NAM  N/A	E	(18) YEAR:	S OF AGE LIVING IN	DECLARANT'S HOUSEHO
UNMARRI	NAM	E	(18) YEAR:	S OF AGE LIVING IN	DECLARANT'S HOUSEHO

### 1. ASSETS

### a. Real Properties\*

DESCRIPTION [e.g. lot, house and lot, condominium and improvements]			VALUE	CURRENT FAIR MARKET VALUE	ACQUISITION		ACQUISITION
			(As found in the Tax Declaration of Real Property)		YEAR	MODE	
None			N/A	N/A	N/A	N/A	N/A

years of age living in declarant's household)

Subtotal: 0.00

## b. Personal Properties\*

DESCRIPTION	YEAR ACQUIRED	ACQUISITION COST/AMOUNT
MacBook Air	CY 2017-2018	56,000.00
Iphone SE	CY 2016-2018	22,000.00
Honda wave	CY 2014	20,000.00
Go Pro Hero 3+ (second hand)	CY 2014	20,000.00
HP Notebook (14-ac182nd)	CY 2016	15,000.00

Subtotal: 133,000.00

TOTAL ASSETS (a+b): 133,000.00

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

#### 2. LIABILITIES\*

NATURE	NAME OF CREDITORS	OUTSTANDING BALANCE
None	N/A	

TOTAL LIABILITIES: 0.00

NET WORTH: Total Assets less Total Liabilities = 133,000.00

\* 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
NA			

#### 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
ARIEL ARCE	FATHER	MUNICIPAL RCC	LGU, Bato, Leyte
ESTRELLA VIRGILIA ARCE	MOTHER	TEACHER	DePEd, Bato National High School Bato, Leyte
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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	: 04/30/19				
	(Signa	ature of Declarant)		(Signature	of Co-Declarant/Spouse)
ID N	ernment Issued ID: o.: Issued:	Passport EC5299802 Sept. 11, 2015	APR	Government Issued ID: ID No.: Date Issued: 3 0 2019	
	SUBSCRIBED AN Imment issued ide			y of, affiant	exhibiting to me the above-stated GUINOCOR tering Oath)