

SWORN STATEMENT OF ASSETS, LIABILITIES AND NET WORTHAs of December 31, 2022

(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:	CIMAFRANCA	LYNETTE	C.	POSITION:	ASSISTANT PROF. I
	(Family Name)	(First Name)	(M.I.)	AGENCY/OFFICE:	VISAYAS STATE UNIVERSITY
ADDRESS:	BRGY. SAN ISIDRO			OFFICE ADDRESS:	VISCA, BAYBAY CITY, LEYTE
	BAYBAY CITY, LEYTE				
SPOUSE:	CIMAFRANCA	HERLSON	A.	POSITION:	N.A.
	(Family Name)	(First Name)	(M.I.)	AGENCY/OFFICE:	N.A.
				OFFICE ADDRESS:	N.A.

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

NAME	DATE OF BIRTH	AGE
KHEVIN C. CIMAFRANCA	JANUARY 31, 2007	14
KHAYLE MARIE C. CIMAFRANCA	OCTOBER 16, 2015	6

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 mixed use)	EXACT LOCATION	ASSESSED VALUE	CURRENT FAIR MARKET VALUE	ACQUISITION		ACQUISITION COST
			(As found in the Tax Declaration of Real Property)		YEAR	MODE	
NA	NA	NA	NA	NA	NA	NA	NA

Subtotal: _____**b. Personal Properties***

DESCRIPTION	YEAR ACQUIRED	ACQUISITION COST/AMOUNT
DOLLAR ACCOUNT	2019	(USD 1066.36) 57,903.35
STAND MIXER	2020	19,000
VSUCC SHARE CAPITAL & DEPOSITS	2013-2021	208,442.20
SAVINGS BANK DEPOSIT	2016-2020	162,741.10
St. Peter Contribution	2018	119,700.00
TV	2021	23,000.00
Cellphone	2022	29,000.00

Subtotal : **619,786.65****TOTAL ASSETS (a+b):** **619,786.65**

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

LIABILITIES*

NATURE	NAME OF CREDITORS	OUTSTANDING BALANCE
NA	NA	NA

TOTAL LIABILITIES:**NET WORTH : Total Assets less Total Liabilities =****619,786.65**

* 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
NA	NA	NA	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
MARCHO P. BANDALAN	UNCLE	ADMIN AIDE III	VSU / SPPMO, VISCA, BAYBAY
EILEEN B. BANDALAN	COUSIN	ASSISTANT PROF II	VSU /DFST, VISCA, BAYBAY
MARVIN B. BANDALAN	COUSIN	ADMIN AIDE III	VSU / IGP OFFICE, VISCA, BAYBAY
AIZA B. BESAVILLA	COUSIN	ADMIN CLERK	VSU / DPO OFFICE, VISCA, BAYBAY

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: March 31, 2023**LYNETTE C. CIMA FRANCA**

(Signature of Declarant)

Government Issued ID: VSU ID
ID No.: V000731
Date Issued: 2011**HERLSON A. CIMA FRANCA**
NA

(Signature of Co-Declarant/ Spouse)

Government Issued ID: N.A.
ID No.: N.A.
Date Issued: N.A.

SUBSCRIBED AND SWORN to before me this 05 APR 2023 day of _____, affiant exhibiting to me the above-stated government issued identification card.

ATTY. RYSAN C. GUINOCOR
(Person Administering Oath)