

SWORN STATEMENT OF ASSETS, LIABILITIES AND NET WORTH

As of DECEMBER 31, 2018

(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:	CAGANDE	LOREME	S.	POSITION:	SUBSTITUTE INSTRUCTOR
	(Family Name)	(First Name)	(M.I.)	AGENCY/OFFICE:	DEPARTMENT OF AGRONOMY
ADDRESS:	BOUGAINVILLEA COTTAGE, VISAYAS STATE UNIVERSITY, BAYBAY CITY, LEYTE 6521			OFFICE ADDRESS:	VISAYAS STATE UNIVERSITY VISCA BAYBAY CITY, LEYTE
SPOUSE:	N/A			POSITION:	N/A
	(Family Name)	(First Name)	(M.I.)	AGENCY/OFFICE:	
				OFFICE ADDRESS:	

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

NAME	DATE OF BIRTH	AGE
N/A	N/A	N/A

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 and improvements)</small>	KIND <small>(e.g. residential, commercial, industrial, agricultural and mixed use)</small>	EXACT LOCATION	ASSESSED VALUE	CURRENT FAIR MARKET VALUE	ACQUISITION		ACQUISITION COST
			<small>(As found in the Tax Declaration of Real Property)</small>		YEAR	MODE	
N/A							

Subtotal: 0.00

b. Personal Properties*

DESCRIPTION	YEAR ACQUIRED	ACQUISITION COST/AMOUNT
LAPTOP	2016	18,000.00
CELLULAR PHONE	2018	18,000.00
DIGITAL CAMERA	2018	6,000.00

Subtotal: 42,000.00

TOTAL ASSETS (a+b): 42,000.00

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

2. LIABILITIES*

NATURE	NAME OF CREDITORS	OUTSTANDING BALANCE
N/A		

TOTAL LIABILITIES: 0

NET WORTH: Total Assets less Total Liabilities = 42,000.00

* 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
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
DOLCY C. MESA	SISTER	TEACHER	NATUBGAN ELEM. SCHOOL, NATUBGAN, LEYTE
MURILLO S. CAGANDE	FATHER	BRGY. COUNSELOR	SAN ANTONIO, DUERO, BOHOL

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: January 18, 2019

L. f. Cagande
(Signature of Declarant)

(Signature of Co-Declarant/ Spouse)

Government Issued ID: PRC I. D
ID No.: 0023302
Date Issued: 12-04-2015

Government Issued ID:
ID No.:
Date Issued:

SUBSCRIBED AND SWORN to before me this 1 day of APR 10 2019, affiant exhibiting to me the above-stated government issued identification card.

ATTY. MYRA DELE L. AURE
PUBLIC ATTORNEY
PURSUANT TO R.A. 9406

(Person Administering Oath)

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