113,000.00

SWORN STATEMENT OF ASSETS, LIABILITIES AND NET WORTH

As of 14, 2625 (Required by R.A. 6713)

Note: Husband and wife who are both public officials and employees may file the required statements jointly or separately.

KOITION	≤ Separate Filing	≤ Not Applicable			DE CATATY BE SINGS			
DECLARANT:	DELIMA, GINA A. (Family Name) (M. I.)			< 380	POSITION: AGENCY/OFFICE:		ASSITANT PROFESSOR I	
	(First Name) (M. I.)			FOR SHE LINE THE CONTRACTOR				
ADDRESS	BRGY. BIASO		OFFICE ADDI	RESS: V	/ISCA, BAYBAY CITY, LEYTE			
SPOUSE:	NA	_	POSITION:					
	(Family Name) (First Name) (M. I.)				AGENCY/OFF OFFICE ADDR			
UNM	ARRIED CHILDRE	N BELOW EIG	HTEEN (18) YEARS	OF AGE LIV	ING IN DECI	ARANT'S	S HOUSEHOLD	
	DELIMA, GIANFE 321/334.1/334.2			DATE OF BIRTH APRIL 1, 2011			AGE 8	
		roading while	v. Literlande ydayi Erdon,	m. O. L. no spenie	SWIND THE	Egy A color	-Valentin to	
		ASSI	TS, LIABILITIES A	ND NETWOR	do seal m	M. HA	ja i	
	(Including those	of the spouse ar	nd unmarried children l	below eighteen (1H 18) vears of ag	e livino in		
ASSETS	GENT VOFFICE :		declarant's househousehousehousehousehousehousehouse	old)	AHONSHIP	ATA REL	ICOFRELATIVE	
bafas dentimo	Marie Carlos de la Carlos de Carlos	South Rest of the Section (Section)		SKOTS ON A LINEAR WIND	t augestieringste verbereite	Charles South Land	December to the second	
a. Real Properties	5*							
DESCRIPTION	DESCRIPTION KIND EXACT ASSESSED VALUE				CURRENT			
	(e.g.residential, commercial, industrial, agricultural and mixed	LOCATION	ASSESSED VALUE	FAIR MARKET VALUE	ACQUISITION		ACQUISITION COST	
t. lot, house and lot condominium and improvements)			(As found in the Tax) Real Prope	Declaration of rty)	YEAR MOD			
NONE	use)							
or fair	in the second or breaking second or	odevá drave Ostavá spali	zero dahan erre zhrezh (134) zars e	าง vreiad nati	duarriec chil	ha stat orbas sa	oby cemily that those as are are short	
ZIONE.	gerhaario valgoo	IIVD ID IONA IIII	IN HORTONES OF				NA	
b. Personal Prope	rties*				S	ubtotal: P	14/7	
DESCRIPTION				YEAR ACQUIRED			ACQUISITION COST/	
VEHICLE (2ND HAND) TO A 15th and hands if shake a very signife virus hand a table				asob doce sone 2014 arrend to me			60,000.00	
APTOP SET THE SIDE OF				2017			30,000.00	
ANON CAMERA				2019			23,000.00	
							- Paranti n	
					St	ıbtotal: P	113,000.00	
LIABILITIES*					TOTAL ASS	ETS (a + b	o):	
NATURE				NAME OF CREDITORS			OUTETANDAYOR	
ONE			ANDELLE	OF CO	OF CREDITO	765	OUTSTANDING BALANCE	
		A	.15	Belt Stoll			and the state of t	
200				N 1 844				
	Dutal -970d8 ort	an or goridin.	CARALLE EUR	10 750	TOTAL LIAB	II ITIES.	JANOHA IMAGIN	

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

NETWORTH: Total Assets Less Total Liabilities =

BUSINESS INTERESTS AND FINANCIAL CONNECTIONS

(of Declarant/ Declarant's spouse/ Unmarried Children Below Eighteen(18) years of Age Living in Declarant Household) I/We do not have any business interest or financial connection. NATURE OF BUSINESS DATE OF ACOUISITION NAME OF ENTITY/BUSINESS **BUSINESS ADDRESS** INTEREST &/OR FINANCIAL OF INTEREST OR ENTERPRISE CONNECTION CONNECTION **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 relavtive/s in the government service. NAME OF AGENCY/OFFICE AND NAME OF RELATIVE RELATIONSHIP **POSITION ADDRESS** NO ONE THAT I KNOW OF 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. (Signature of Declarant) (Signature of Co-Declarant/Spouse) Government Issued Government Issued ID No.: ID No.: Date Issued: Date Issued: SUBSCRIBED AND SWORN to before me this 2013, affiant exhibiting to me the above-stated government issued identification card.

ATTY. RYSAN C. GUINOCOR
Page 2 of 9U LE CHARGO FACIONIA Rering Oath)