

SWORN STATEMENT OF ASSETS, LIABILITIES AND NET WORTH

As of December 31, 2019
(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:	CIMA FRANCA	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:	CIMA FRANCA	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. CIMA FRANCA	JANUARY 31, 2007	12
KHAYLE MARIE C. CIMA FRANCA	OCTOBER 16, 2015	4

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	
none							

Subtotal: N/A

b. Personal Properties*

DESCRIPTION	YEAR ACQUIRED	ACQUISITION COST/AMOUNT
HONDA MOTORCYCLE	2007	45,000.00
IPAD MINI	2013	15,000.00
SHARP REFRIGERATOR	2014	9,990.00
VSU SHARE CAPITAL & DEPOSITS	2013-2019	115,176.25
CELPHONE	2016	9,990.00
CLOTHES	2016	5,000.00
SAVINGS BANK DEPOSIT	2016	70,000.00
CLOTHES	2017	5,000.00
CLOTHES	2018	5,000.00
Dollar account	2019	(USD 500) 25,320.00

Subtotal : 305,476.25

TOTAL ASSETS (a+b): 305,476.25

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

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LIABILITIES*

NATURE	NAME OF CREDITORS	OUTSTANDING BALANCE

TOTAL LIABILITIES: N/A

NET WORTH : Total Assets less Total Liabilities = 305,476.25

* 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
NONE			

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
LOURDES B. CANO	MOTHER	CHIEF AO	VSU / ADMIN, VISCA, BAYBAY
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

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 9, 2020

LYNETTE C. CHMAFRANCA
(Signature of Declarant)

(Signature of Co-Declarant/ Spouse)

Government Issued ID: VSU ID
ID No.: V-00731
Date Issued: _____

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

SUBSCRIBED AND SWORN to before me this MAR 12 2020 day of _____, affiant exhibiting to me the above-stated government issued identification card.

ATTY. RYAN C. GUINOCOR
(Person Administering Oath)