Revised as of January 2015 Per CSC Resolution No. 1500088 Promulgated on January 23, 2015

SWORN STATEMENT OF ASSETS, LIABILITIES AND NET WORTH

As of (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: CAÑA RANDY POSITION: **ADMINISTRATIVE AIDE IV** (Family Name) (First Name) (M. I.) **VSU PRINTING PRESS** AGENCY/OFFICE: OFFICE ADDRESS: VSU, VISCA BAYBAY CITY **ADDRESS BRGY. GUADALUPE ZONE-4** LEYTE, PHIL. 6521-A **BAYBAY CITY, LEYTE** CAÑA HANCEY ISABEL SPOUSE: POSITION: N/A (Family Name) (First Name) (M. I.) N/A AGENCY/OFFICE: OFFICE ADDRESS: N/A UNMARRIED CHILDREN BELOW EIGHTEEN (18) YEARS OF AGE LIVING IN DECLARANT'S HOUSEHOLD NAME DATE OF BIRTH AGE JO-ANN LI M. CAÑA March 30, 2007 17 PRINCESS VIANNA M. CAÑA July 4, 2010 14 FRANCE ISABELA M. CAÑA September 2, 2015

ASSETS, LIABILITIES AND NETWORTH

(Including those of the spouse and unmarried children below eighteen (18) years of age living in declarant's household)

ASSETS

a. Real Properties*

DESCRIPTION	KIND	EXACT LOCATION	ASSESSED VALUE	FAIR MARKET VALUE	ACQUISITION	ACQUISITION COST	
(e.g. lot, house and lot condominium and improvements)	(e.g.residential, commercial, industrial, astricultural and mixed		(As found in the Tax Declaration of Real Property)		YEAR	MODE	
N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A

Subtotal: P

b. Personal Properties*

DESCRIPTION	YEAR ACQUIRED	ACQUISITION COST/ AMOUNT
Cellphone	2023	7,999.00
Electric Fan	2023	3,175.00
Guitar	2021	1,500.00
Sofa Set	2016	12,000.00
Cabinet	2020	3,500.00
	Subtotal: P	28,174.00

Subtotal: P

TOTAL ASSETS (a + b):

28,174.00

LIABILITIES*

NATURE	NAME OF CREDITORS	OUTSTANDING BALANCE
N/A	N/A	N/A
WEST THE TOTAL		

TOTAL LIABILITIES:

NETWORTH: Total Assets Less Total Liabilities =

28,174.00

^{*}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 Household)

NAME OF ENTITY/BUSINESS ENTERPRISE	BUSINESS ADDRESS	NATURE OF BUSINESS INTEREST &/OR FINANCIAL CONNECTION	DATE OF ACQUISITION OF INTEREST OR CONNECTION
none	N/A	N/A	N/A
			1.000

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 RELATIVE	RELATIONSHIP	POSITION	NAME OF AGENCY/OFFICE AND ADDRESS
RICHARD G. CAÑA	BROTHER	ADMIN AIDE IV	BERU, BAYBAY CITY
		=	South Brown Walley
		ASSESSED TO THE PROPERTY OF TH	

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.

0, 2024	
2	N/A
of Declarant)	(Signature of Co-Declarant/Spouse)
PhilHealth	Government Issued
13-050045896-9	ID No. :
N/A	Date Issued:
	of Declarant) PhilHealth 13-050045896-9 N/A AND SWORN to before me this ment issued identification card.