

## OFFICE OF THE HEAD OF RECORDS AND ARCHIVES

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## REQUEST FOR INFORMATION/RECORD

	Lazona	Da <sup>t</sup>	te: 2/14/22
Name of Requestor:	Yhena Bandibas / Kevin	Mick Bandibas	+
Address:	DOPAC JUSU		
Contact Number:	09291141790	E-mail addre	ss: vivian. lina evsu. elu
Proof of Identity:	PRC 10 / DRIVER'S LICENS	<u> </u>	0.:
Requested Information	on: Service Record		
No. of copies: 1			
Reason & intended u	se of requested information/doc		
	Colina VIVIAN P. LINA		
Name & Signature of	Requestor/Representative		
Action on the reque	est:		
Approved:			
	RYSAN C. GUING Director, ODAS and FOI		
Evidence of payment	t: OR No Da	ate:	Amount:
Disapproved:			
	RYSAN C. GUING Director, ODAS and FOI		
Remarks/reason for	disapproval:		
		*	