



REQUEST FOR INFORMATION/RECORD

Date: Feb 10/22

Name of Requestor: MAGDALENE C. UNAJAN et. al

Address: KILIM, BAYBAY

Contact Number: 09171541530

E-mail address: magdalene.unajan@vsu.edu.ph

Proof of Identity: VSU ID

ID No.: V 000 525

Requested Information:

Service records

No. of copies: 2 copies each

Reason & intended use of requested information/document

NBC 8th cycle supporting document

MAGDALENE C. UNAJAN
Signature of Requestor/Representative

Michael Anthony Jay Pegis

JONAH FLORES V. ORANDO

EUGENE VAL MANGAONG

MARICEL V. LIM

Action on the request:

Approved:

RYSAN C. GUINOCOR
Director, ODAS and FOI Decision Maker

Evidence of payment: OR No. _____ Date: _____ Amount: _____

Disapproved:

RYSAN C. GUINOCOR
Director, ODAS and FOI Decision Maker

Remarks/reason for disapproval: