



**REQUEST FOR INFORMATION/RECORD**

Date: April 4, 2022

Name of Requestor: Ia Purple P. Ignacio

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Proof of Identity: Dep Ed ID

ID No.: 4811384

Requested Information:

TOR

No. of copies: \_\_\_\_\_

Reason & intended use of requested information/document

for transfer

GINA P. IGNACIO

Name & Signature of Requestor/Representative

**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: