



REQUEST FOR INFORMATION/RECORD

Date: 2 / 22 / 2022

Name of Requestor: PHILOM D. GALUPD

Address: BRCY. STA. CRUZ, BAYBAY CITY

Contact Number: 0926446 3556 / PPO 1041

E-mail address: philom.galupa@vsu.edu.ph

Proof of Identity: (EMPLOYEES ID) PHIC

ID No.: 20-025053559

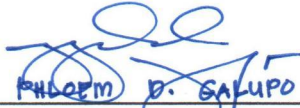
Requested Information:

SERVICE RECORD

No. of copies: 1

Reason & intended use of requested information/document

HOUSING APPLICATION


PHILOM D. GALUPD

Name & Signature of Requestor/Representative

Action on the request:

Approved:

RYSAN C. GUINOCOR

Director, ODAS and FOI Decision Maker

Evidence of payment: OR No. 0608082 Date: 2/22/22 Amount: 101

Disapproved:

RYSAN C. GUINOCOR

Director, ODAS and FOI Decision Maker

Remarks/reason for disapproval: