

## OFFICE OF THE HEAD OF RECORDS AND ARCHIVES

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## REQUEST FOR INFORMATION/RECORD

		Date: 2/17/2022
Name of Requestor:	SIRENE P. NAMPE	
Address:	coson, bayloay, leyre	
Contact Number:	09554932026	E-mail address: Struk napremi
Proof of Identity:	aniabalta id	ID No.: <u>VOLOSO</u>
Requested Information	n:	
TPE	ES RESULT	
No. of copies:1		
Reason & intended us	se of requested information/docu	ıment
Fo	R NBC 8th CYCLE	
Name & Signature of Action on the request	Requestor/Representative	
	RYSAN C. GUINO Director, ODAS and FOI De	
Evidence of payment:	OR No. 0607755 Dat	e: 17 - Feb - 22 Amount: 25. 10
Disapproved:		
	RYSAN C. GUINO Director, ODAS and FOI De	
Remarks/reason for d	isapproval:	