



REQUEST FOR INFORMATION/RECORD

Date: Feb. 17, 2022

Name of Requestor: Felix J. Amestoso et. al.

Address: DIST, VSU, Baybay City, Leyte

Contact Number: 09069679011

E-mail address: felix.amestoso@vsu.edu.ph

Proof of Identity: VSM ID

ID No.: Vmm 36

Requested Information:

Certification of Summary (TPES) for rating period (Jul 2016 - June 2019)

No. of copies: 1

Reason & intended use of requested information/document

QCE Purpose

FELIX J. AMESTOSO

Signature of Requestor/Representative

Action on the request:

Approved:

RYSAN C. GUINOCOR

Director, ODAS and FOI Decision Maker

Evidence of payment: OR No. 0607876 Date: 2/18/22 Amount: 25/-

Disapproved:

RYSAN C. GUINOCOR

Director, ODAS and FOI Decision Maker

Remarks/reason for disapproval: