

OFFICE OF THE HEAD OF RECORDS AND ARCHIVES

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REQUEST FOR INFORMATION/RECORD

		Date:
Name of Requestor:	NANCY D. ABWIDA	
Address:	YSu, Vica, Baybay City	-
Contact Number:	0948 - 414 - 3834	E-mail address: wancy. aborder vsn. ph. ph
Proof of Identity:	~su 10	ID No.:
Requested Information	n:	
leroic	s Record	
No. of copies:		
Reason & intended us	se of requested information/docum	nent
***	NDC 461 8th Cycle sattast	
Nowley D. Arm	MD A	
Signature of Requesto		
Action on the reques	st:	
Approved:		
	RYSAN C. GUINOCO Director, ODAS and FOI Deci	
Evidence of payment:	OR No. <u>000677</u> Date:	2 Feb. 2-22 Amount: 10. 6
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Disapproved:		
	RYSAN C. GUINOCO Director, ODAS and FOI Deci	
Remarks/reason for d	isapproval:	

No.