

OFFICE OF THE HEAD OF RECORDS AND ARCHIVES

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REQUEST FOR INFORMATION/RECORD

		Date: 03-03-2022	
Name of Requestor: Address: Contact Number: Proof of Identity: Requested Informatio	MacArthur Leyte 09489762 630 UMID	E-mail address: jay.bansale	@kv.edu.pl/
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No. of copies:			
Reason & intended us	se of requested information/docume	nt	
	Housing Application		
	your/ Bansale		
Name & Signature of	Requestor/Representative		
Action on the reque	st:		
Approved:			
	RYSAN C. GUINOCOF Director, ODAS and FOI Decisi		
Evidence of payment	: OR No. 060 871 Date: _	3/2/22 Amount: 10/	
Disapproved:			
	RYSAN C. GUINOCOI Director, ODAS and FOI Decisi		
Remarks/reason for o	disapproval:		