

OFFICE OF THE HEAD OF RECORDS AND ARCHIVES

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REQUEST FOR INFORMATION/RECORD

| | Date: _ | Rb 8,2022 |
|---|-----------------|--------------------------|
| Name of Requestor: May Ann E. palco | | , |
| Address: BR61. and lope Baybayling | | |
| Contact Number: VOIP 10 31 | E-mail address: | may ann. palen@vsv.eduph |
| Proof of Identity: 10 | | V00702 |
| Requested Information: | | |
| service Record | | |
| | | |
| No. of copies: | | |
| Reason & intended use of requested information/docume | nt | |
| NBC purposes | | |
| | | |
| MA - KW | | |
| Margany Cuy | | |
| Signature of Requestor/Representative | | |
| Action on the request: | | |
| | | |
| Approved: | | |
| | | |
| RYSAN C. GUINOCOF Director, ODAS and FOI Decisi | | |
| | | |
| Evidence of payment: OR No. <u>066917</u> Date: _ | 4 706. 2011 Am | nount: |
| Disapproved: | | |
| | | |
| RYSAN C. GUINOCOR | | |
| Director, ODAS and FOI Decisi | on Maker | |
| Remarks/reason for disapproval: | | |
| | | |
| | | |