

OFFICE OF THE HEAD OF RECORDS AND ARCHIVES

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REQUEST FOR INFORMATION/RECORD

		Date: May 19, 2022
Name of Requestor:	Matrio A. Valenzoner	<u>/</u>
Address:	Tabrand, Kum Bay	ear City Layle
Contact Number:	0017 CB14050 1HERC	E-mail address: mary alenge yahro
Proof of Identity:	VSWID	ID No.: 1000680
Requested Information	on: personal	
No. of copies:	- copies	
Reason & intended u	use of requested information/docu ບ້ານເປັນ 1	ument
	f Requestor/Representative	
Action on the reque	est:	
Approved:		
	RYSAN C. GUINO Director, ODAS and FOI De	
Evidence of paymen	it: OR No. 9612905 Dar	te: 5/19/22 Amount: 40/
Disapproved:		
	RYSAN C. GUINO Director, ODAS and FOI De	
Remarks/reason for	disapproval:	

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