

## OFFICE OF THE HEAD OF RECORDS AND ARCHIVES

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## REQUEST FOR INFORMATION/RECORD

		Da	ate: 2/18/3022	
Name of Requestor:	Ris Mepoel & Modina			
Address:	DBS			
Contact Number:	09217676949	E-mail addre	ess: <u>rismenal.madivaa</u> u	mu.edu.ph
Proof of Identity:	V8M 1D	ID No.:		
Requested Informatio	ification of the summary	of TRES voiling	C July 2016 -	
No. of copies:\				
Reason & intended us	se of requested information/doct	ument		
Name & Signature of	Requestor/Representative			
Action on the reque	st:			
Approved:				
	RYSAN C. GUINO Director, ODAS and FOI De			
Evidence of payment	: OR No. 0607879 Da	te: 2/18/22	_Amount: 25/	
Disapproved:				
	RYSAN C. GUINO Director, ODAS and FOI De			
Remarks/reason for o	lisapproval:			