



REQUEST FOR INFORMATION/RECORD

Date: March 3, 2022

Name of Requestor: Allan A. Ramal
Address: DOPAC, VSU, Baybay City Leyte
Contact Number: 0919 7043 449 E-mail address: _____
Proof of Identity: VSU ID ID No.: 437

Requested Information:

Service Records

No. of copies: 1

Reason & intended use of requested information/document

for NBC evaluation

Allan A. Ramal
Name & Signature of Requestor/Representative

Action on the request:

Approved:

RYSAN C. GUINOCOR
Director, ODAS and FOI Decision Maker

Evidence of payment: OR No. 0607346 Date: 2/11/22 Amount: 10-

Disapproved:

RYSAN C. GUINOCOR
Director, ODAS and FOI Decision Maker

Remarks/reason for disapproval:

