

## OFFICE OF THE HEAD OF RECORDS AND ARCHIVES

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## REQUEST FOR INFORMATION/RECORD

			Date: M	ay 20,2022
Name of Requestor:	icente A. G	ilos		J
Address:	ffice of the Chi	ief Libratian		
Contact Number:	09385009164	E-	mail address:V	icailes
Proof of Identity:	VSU ID		ID No.:	V00315
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	of requested informat USEA & EY Thruster D of	tion/document	- Ilu Pa	rameter A.
VICENTE A.	Survey B G/LOS	Visit.	2/3/00/3/7//	
Name & Signature of Requestor/Representative				
Action on the request:				
Approved:				
RYSAN C. GUINOCOR Director, ODAS and FOI Decision Maker				
Evidence of payment: O	R NoWamd	Date:	Amou	unt:
Disapproved:				
RYSAN C. GUINOCOR  Director, ODAS and FOI Decision Maker				
Remarks/reason for disa	approval:			