



REQUEST FOR INFORMATION/RECORD

Date: 06/01/2022

Name of Requestor: Camandona, Nina Mae F.

Address: Zone 21, Baybay City, Leyte

Contact Number: 0939 634 4694/DLABS

E-mail address: ninamcamandona@gmail.com

Proof of Identity: National ID

ID No.: 2130516572467593

Requested Information:

Certificate of Employment - 3 semesters (March 2021 - June 2022)
① March 2021 - July 2021 ; ② August 2021 - January 2022
③ February 2022 - June 2022

No. of copies: 3

Reason & intended use of requested information/document

Employment

NINA MAE F. CAMANDONA

Name & Signature of Requestor/Representative

Action on the request:

Approved:

RYSAN C. GUINOCOR

Director, ODAS and FOI Decision Maker

Evidence of payment: OR No. 0613448 Date: 6/1/22 Amount: 301

Disapproved:

RYSAN C. GUINOCOR

Director, ODAS and FOI Decision Maker

Remarks/reason for disapproval:

