



REQUEST FOR INFORMATION/RECORD

Date: 02/17/22

Name of Requestor: Jayzon G. Bitacura

Address: DPS, VSU

Contact Number: 09176075221

E-mail address: jayzon.bitacura@vsu.edu.ph

Proof of Identity: VSUID

ID No.: V00697

Requested Information:

Certificate of Summary of TPES rating (July 2016 - June 2019)

No. of copies: 1

Reason & intended use of requested information/document

NBC 461 8th Cycle Evaluation (QCE)

JB Bitacura

Signature of Requestor/Representative

Action on the request:

Approved:

RYSAN C. GUINOCOR
Director, ODAS and FOI Decision Maker

Evidence of payment: OR No. 0607819 Date: 2/17/22 Amount: 25/-

Disapproved:

RYSAN C. GUINOCOR
Director, ODAS and FOI Decision Maker

Remarks/reason for disapproval: