

## OFFICE OF THE HEAD OF RECORDS AND ARCHIVES

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## REQUEST FOR INFORMATION/RECORD

Af Am	me Oproved	Date: Jaw wany 31, 122
Name of Requestor: LEV A. KAMME	w, sumpmontre esu	with a chount resapes
Address: \( \text{Vull}	<u> </u>	-
Contact Number: US - 543 -	7-27	E-mail address: 10 manoh @ yu ed
Proof of Identity:		ID No.: www.
Requested Information:	9 00 6	
No. of copies: 1 copy and		
Reason & intended use of requester	d information/docum	ent
For promotion purposes		
Signature of Requestor/Representa  Action on the request:  Approved:	tive	
	RYSAN C. GUINOCO ODAS and FOI Deci	
Evidence of payment: OR NoO	606762 Date:	31-191.1022 Amount: \$60.00
Disapproved:		
	RYSAN C. GUINOCO ODAS and FOI Deci	
Remarks/reason for disapproval:		