



REQUEST FOR INFORMATION/RECORD

Date: 4/17/2022

Name of Requestor: Rommel B. Bata

Address: PO. Candelaria Baybay, Cebu

Contact Number: 09363704477

E-mail address: romelbata@yahoo.com

Proof of Identity: _____

ID No.: _____

Requested Information: Certificate of employment

No. of copies: 1

Reason & intended use of requested information/document

Certification of employment
for admission H.S.

Rommel B. Bata
ROMMEL D. BATA
Name & Signature of Requestor/Representative

Action on the request:

Approved:

RYSAN C. GUINOCOR
Director, ODAS and FOI Decision Maker

Evidence of payment: OR No. 0614342 Date: 4/17/22 Amount: 10.

Disapproved:

RYSAN C. GUINOCOR
Director, ODAS and FOI Decision Maker

Remarks/reason for disapproval: