



**REQUEST FOR INFORMATION/RECORD**

Date: 17 February 2022

Name of Requestor: ULYSSES A. CAGASAN  
Address: VSU, VISCA, Baybay City, Leyte  
Contact Number: VOIP # 1013 E-mail address: uly.cagasan@vsu.edu.ph  
Proof of Identity: VSU-IO ID No.: Y00129  
Requested Information:

Summary of TRS from 2016-2019

No. of copies: 1 each

Reason & intended use of requested information/document

NBC 461 8th cycle

Name & Signature of Requestor/Representative

**Action on the request:**

Approved:

**RYSAN C. GUINOCOR**

Director, ODAS and FOI Decision Maker

Evidence of payment: OR No. 0607757 Date: 2/14/22 Amount: 1301

Disapproved:

**RYSAN C. GUINOCOR**

Director, ODAS and FOI Decision Maker

Remarks/reason for disapproval: