

OFFICE OF THE HEAD OF RECORDS AND ARCHIVES

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REQUEST FOR INFORMATION/RECORD

	Date, 100. 14 2000
Name of Requestor: Honeylene V. Ongy	
Address: Bray. Kan-ion Baybay City, L	e71e
Contact Number: 0998347 08 16	E-mail address: honey lene. ongy@vev. edu. ph
Contact Number: 0998347 08 16 Proof of Identity: Cchool / Company 10	ID No .: VO10 36
Danisated Intermedian	
Summary of TIPES from June 2016	- July 2019
No. of copies:	
Reason & intended use of requested information/document	
QCE for NBC 8th cycle	
Jan San San San San San San San San San S	
Signature of Requestor/Representative	
Action on the request:	
Approved:	
Approved:	
RYSAN C. GUINOCOR	
Director, ODAS and FOI Decisio	
Evidence of payment: OR No. 060 7819 Date:	2/17/22 Amount: 25/
Disapproved:	
RYSAN C. GUINOCOR	
Director, ODAS and FOI Decisio	n waker
Remarks/reason for disapproval:	

Nio.