



REQUEST FOR INFORMATION/RECORD

Date: DEC 29, 2021

Name of Requestor: GEMMARIE R. ASAUD

Address: HS A. BONIFADO ST. Baybay City, LEYTE

Contact Number: 0963 119 5074

E-mail address: gemma.asaud@vsu.edu.ph

Proof of Identity: DRIVER'S LICENCE

ID No.: H12-18-003786

Requested Information:

CERTIFICATE OF EMPLOYMENT

No. of copies: 1

Reason & intended use of requested information/document

FOR EMPLOYMENT PURPOSES ONLY


Signature of Requestor/Representative

Action on the request:

Approved:

RYSAN C. GUINOCOR
Director, ODAS and FOI Decision Maker

Evidence of payment: OR No. 06005879 Date: 28 Dec 2021 Amount: ₱ 10.00

Disapproved:

RYSAN C. GUINOCOR
Director, ODAS and FOI Decision Maker

Remarks/reason for disapproval: