

OFFICE OF THE HEAD OF RECORDS AND ARCHIVES

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REQUEST FOR INFORMATION/RECORD

			Date: Jan 17, 202
Name of Requestor:	Stime B	BERONDO	
Address:	PANGASUGAN	BAYBAY CUTY	
Contact Number:	production of the control of the con		
Proof of Identity:			ID No.: <u>V00104</u>
Requested Informatio	n: SERVICE CERTIFIC	RECORD AT GREM	pagmen
No. of copies: Acc	pelas ExcH		
Reason & intended us	se of requested info	rmation/document	
- FOF	Retirem	ent	
S			
Signature of Request	or/Representative		
Action on the reque	st:		
Approved:			
		N C. GUINOCOR S and FOI Decision Ma	aker
Evidence of payment	: OR No	Date:	Amount:
Disapproved:			
		N C. GUINOCOR S and FOI Decision Ma	aker
Remarks/reason for d	lisapproval:		
-	-		