



REQUEST FOR INFORMATION/RECORD

Date: Feb. 2, 2022

Name of Requestor: MA. RACHEL KIM L. AURE

Address: APT. 46 VSU

Contact Number: 565 0600 loc. 1104

E-mail address: kim_aure@vsu.edu.ph

Proof of Identity: VSU

ID No.: V000056

Requested Information:

Service record for NBC

No. of copies: 2

Reason & intended use of requested information/document

NBC purposes


Signature of Requestor/Representative

Action on the request:

Approved:

RYSAN C. GUINOCOR
Director, ODAS and FOI Decision Maker

Evidence of payment: OR No. 0606775 Date: 2 Feb. 2022 Amount: 10

Disapproved:

RYSAN C. GUINOCOR
Director, ODAS and FOI Decision Maker

Remarks/reason for disapproval: