

OFFICE OF THE HEAD OF RECORDS AND ARCHIVES

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REQUEST FOR INFORMATION/RECORD

		Date: Feb.	4,2022
Name of Requestor:	SALVA DOR M- C	ATRE JR.	
Address:	Rm - 3002, [4, VSU		
Contact Number:	09058844431	E-mail address:calv	ador-cate @
Proof of Identity:	10	ID No.: <u>//0</u>	199
Requested Information			
	Me Recora		
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No. of copies:1	<u>- </u>		
Reason & intended u	se of requested information	n/document	
Suppor	ting document for	NBC 461 - application for	reclassification
Salvadorla	to		
SALVADORM- CA	JOSE, JR.		
Signature of Request	or/Representative		
Action on the reque	est:		
Approved:			
	RYSAN C. G Director, ODAS and F		
Evidence of payment	:: OR No. <u>0606881</u>	Date: <u>3 🗫 622</u> Amount: _	70
Disapproved:			
	RYSAN C. G Director, ODAS and F		
D			
Remarks/reason for o	isapproval:		