



REQUEST FOR INFORMATION/RECORD

Date: May 18, 2022

Name of Requestor: Fedel Ann Barsugy Gumad

Address: Brgy. Bitanhan

Contact Number: 09550837420

E-mail address: gumad.fedelann@gmail.com

Proof of Identity: _____

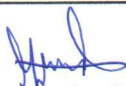
ID No.: HR-16-000874

Requested Information: Certificate of Employment

No. of copies: 2

Reason & intended use of requested information/document

for employment


Fedel Ann B. Gumad

Name & Signature of Requestor/Representative

Action on the request:

Approved:

RYSAN C. GUINOCOR
Director, ODAS and FOI Decision Maker

Evidence of payment: OR No. 0612814 Date: 5/18/22 Amount: 201

Disapproved:

RYSAN C. GUINOCOR
Director, ODAS and FOI Decision Maker

Remarks/reason for disapproval: