



REQUEST FOR INFORMATION/RECORD

Date: 5/13/2022

Name of Requestor: Leo A. Mamolo
Address: Hilusb, Mahaplag, Leyte
Contact Number: 0951 822 5686 E-mail address: leo.mamolo@vsu.edu.ph
Proof of Identity: Community Tax Certificate ID No.: 13076337
Requested Information:

Copy of TOR and Copy of Diploma in BS Ed Math

No. of copies: 1

Reason & intended use of requested information/document

for employment purposes

Leo A. Mamolo
Name & Signature of Requestor/Representative

Action on the request:

Approved:

RYSAN C. GUINOCOR
Director, ODAS and FOI Decision Maker

Evidence of payment: OR No. _____ Date: _____ Amount: _____

Disapproved:

RYSAN C. GUINOCOR
Director, ODAS and FOI Decision Maker

Remarks/reason for disapproval:

