

OFFICE OF THE HEAD OF RECORDS AND ARCHIVES

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REQUEST FOR INFORMATION/RECORD

		Date: <u>February 4, 2022</u>
Name of Requestor:		
Address:	Visca, Baybay City, Leyte	
Contact Number:	09257593181	E-mail address: luz.asiò@vsu.edu.
Proof of Identity:	Dniver's License	ID No .: # 12-08-000735
Requested Information	Service record	
No. of copies: 2		*
Reason & intended us	e of requested information/docume	ent
Signature of Requesto	or/Representative	
Action on the reques	t:	
Approved:		
	RYSAN C. GUINOCO Director, ODAS and FOI Decis	
Evidence of payment:	OR No. <u>0606 971</u> Date:	4 Feb. 2012 Amount: 20
Disapproved:		
	RYSAN C. GUINOCO Director, ODAS and FOI Decis	
Remarks/reason for di	sapproval:	