



**REQUEST FOR INFORMATION/RECORD**

Date: 17 FEBRUARY 2022

Name of Requestor: J-ANNIE G. EBIT

Address: APT. 50, KILBOURNE DRIVE, VSU, BAYBAY CITY, LEYTE

Contact Number: 09167388483

E-mail address: j.annieebit@vsu.edu.ph

Proof of Identity: VSU ID

ID No.: V00914

Requested Information:

CERTIFICATE OF SUMMARY TPES RATING (JULY 2016-JUNE 2019)

No. of copies: ONE

Reason & intended use of requested information/document

FOR QCE PURPOSE (NBC461 8TH CYCLE)

\_\_\_\_\_  
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:

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