



Republic of the Philippines  
Province of Negros Occidental  
CITY OF VICTORIAS  
Office of the Sangguniang Panlungsod  
-ooOoo-



**REQUISITION FORM**

Date: \_\_\_\_\_

( ) Status of \_\_\_\_\_

( ) Certification of \_\_\_\_\_

( ) Photocopy of \_\_\_\_\_

Attachments: ( ) yes

( ) no

Others: \_\_\_\_\_

Purpose: \_\_\_\_\_

Requested by:

Name: \_\_\_\_\_

Office: \_\_\_\_\_

Contact No: \_\_\_\_\_

Signature: \_\_\_\_\_



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