



Republic of the Philippines  
Office of the Ombudsman  
Agham Road, Diliman, Quezon City

**CONTACT US:**

Records Division : Local 2222 & 2223  
Trunkline : 479-7300  
Website : www.ombudsman.gov.ph

**NOT  
FOR  
SALE**

**REQUEST FOR INFORMATION OR COPY OF DOCUMENTS**

*(Pursuant to Executive Order No. 2, s. 2016 - Freedom of Information Manual)*

Please read the following information carefully before proceeding with your application. Use blue or black ink. Write neatly and in BLOCK letters. Improper or incorrectly filled out forms will not be acted upon. Tick or mark boxes with "X" where necessary. Note: \* denotes mandatory field.

**A. REQUESTING PARTY**

Date:

Requesting Party:  Sex:  Male  Female  
*Title Surname First Name M.I.*

Complete Address   
*(House Number, Street, City/Municipality, Province)*

Contact Information Landline  Fax  Mobile  Email

Preferred Mode of Communication  Email  Fax  Postal Address  Phone

Preferred Mode of Reply/Release  Email  Fax  Postal Address  Pick up

Type of ID Presented    
Signature of Requester

**B. NATURE OF REQUEST**

Request for Information  Request for Copy of Document/Record

Purpose of Request:

Please cite here the details of requested information or document/record:

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**TO BE ACCOMPLISHED BY OMB PERSONNEL**

SUMMARY OF ACTION TAKEN:  

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APPROVED BY:  

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NAME AND DESIGNATION  
FOI Receiving Officer

NAME AND DESIGNATION  
FOI Decision Maker