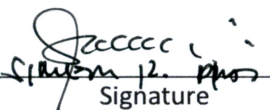




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Reminder: Please complete this form and submit it at the PICTu service desk located at 2nd flr. DENR PENRO Main Bldg., or email a scanned copy to penromarinduque@denr.gov.ph. Once processed, a Technical Support Representative will contact you to schedule service.

Ticket No: 2021-0803-01

Date (mm/dd/yyyy): 08 / 03 / 2021

Requester's Information				
Name: <u>LUCIANO M. KICKREUTE</u>		Title: <u>Special Land Investigator - I</u>		
Office: <u>DENR-PENRO Boac</u>		Building/Room/Fir: <u>ISD Bldg.</u>		
Phone:		Email Address: <u>luciano.kickreute@gmail.com</u>		
Request Information				
Type of request:				
Technical Assistance <input checked="" type="checkbox"/> Hardware <input type="checkbox"/> Software <input type="checkbox"/> Local Area Network <input type="checkbox"/> Information Systems <input type="checkbox"/> Databases Database System Assistance (In-house) <input type="checkbox"/> New User <input type="checkbox"/> Change Password <input type="checkbox"/> System Modification Website <input type="checkbox"/> Posting <input type="checkbox"/> E-mail Assistance Asset/Borrow <input type="checkbox"/> Hardware Components <input type="checkbox"/> Peripherals <input type="checkbox"/> Tools <input type="checkbox"/> Others (specify): _____				
DESCRIPTION OF REQUEST (Please clearly write down the details of the request.)				
<p align="center"><u>To connect laptop to printer</u></p>				
Authorization				
All requests for service must be approved by the appropriate supervisor (at least division chief, OIC, immediate supervisor or next in rank staff) of the requester. By signing below the manager/supervisor certifies that the service is required.				
Full Name: <u>Simon P. Diao</u>		Position/Title: <u>Chief</u>		
 Signature		<u>08 / 03 / 2021</u> Date (mm/dd/yyyy):		
Infrastructure Service Authorization				
All requests for service must be coordinated with and signed by the Chief of PICTu or his/her authorized representative.				
Full Name: <u>Mark Ryan S. Granda</u>		Position/Title: <u>ISM</u>		
 Signature		<u>08 / 03 / 2021</u> Date (mm/dd/yyyy):		
For PICTu Staff Only (Use Back of Form or Separate sheet if necessary)				
Date	Time	Action Taken	Action Staff	Signature
<u>08/03/21</u>	<u>10:30 AM</u>	<u>Epson L360 printer successfully installed</u>	<u>MPH/rods</u>	

Feedback Rating: ☐ Excellent ☒ Very Satisfactory ☐ Satisfactory ☐ Unsatisfactory ☐ Poor

Released by:


Received by:

Signature over printed name

Date (mm/dd/yyyy)

Signature over printed name

Date (mm/dd/yyyy)

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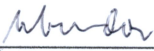
Reminder: Please complete this form and submit it at the PICTu service desk located at 2nd flr. DENR PENRO Main Bldg., or email a scanned copy to penromarinduque@denr.gov.ph. Once processed, a Technical Support Representative will contact you to schedule service.


Ticket No: 2021-0810-1 **Date (mm/dd/yyyy):** 8/10/21


Requester's Information	
Name: <u>CORAZON R. PELAEZ</u>	Title: <u>FOREST TECH. 1</u>
Office: <u>PENRO/ISD/CDS</u>	Building/Room/Flr:
Phone:	Email Address:

Request Information	
Type of request:	
Technical Assistance <input type="checkbox"/> Hardware <input checked="" type="checkbox"/> Software <input type="checkbox"/> Local Area Network <input type="checkbox"/> Information Systems <input type="checkbox"/> Databases Database System Assistance (In-house) <input type="checkbox"/> New User <input type="checkbox"/> Change Password <input type="checkbox"/> System Modification Website <input type="checkbox"/> Posting <input type="checkbox"/> E-mail Assistance Asset/Borrow <input type="checkbox"/> Hardware Components <input type="checkbox"/> Peripherals <input type="checkbox"/> Tools <input type="checkbox"/> Others (specify): _____	

DESCRIPTION OF REQUEST (Please clearly write down the details of the request.)
<u>REPROGRAM OPERATING SYSTEM WINDOWS 10 64BIT</u>


Authorization	
All requests for service must be approved by the appropriate supervisor (at least division chief, OIC, immediate supervisor or next in rank staff) of the requester. By signing below the manager/supervisor certifies that the service is required.	
Full Name: _____	Position/Title: _____
 Signature	<u>8/10/21</u> Date (mm/dd/yyyy):

Infrastructure Service Authorization	
All requests for service must be coordinated with and signed by the Chief of PICTu or his/her authorized representative.	
Full Name: <u>JJ MICANOR</u>	Position/Title: _____
 Signature	<u>8/10/21</u> Date (mm/dd/yyyy):

For PICTu Staff Only (Use Back of Form or Separate sheet if necessary)				
Date	Time	Action Taken	Action Staff	Signature
<u>08/10/21</u>	<u>10:21 AM</u>	<u>Successfully reprogrammed OS</u>	<u>JJ MICANOR</u>	

Feedback Rating: <input checked="" type="checkbox"/> Excellent <input type="checkbox"/> Very Satisfactory <input type="checkbox"/> Satisfactory <input type="checkbox"/> Unsatisfactory <input type="checkbox"/> Poor

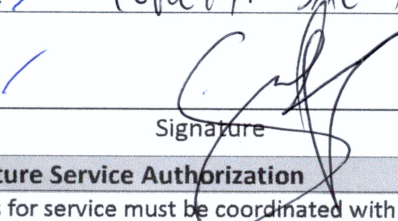
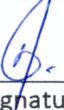
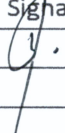
Released by: 	Received by: 
<u>8/10/21</u> Signature over printed name Date (mm/dd/yyyy)	<u>08/10/2021</u> Signature over printed name Date (mm/dd/yyyy)

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Ticket No: 2021-0811-1

Date (mm/dd/yyyy): 02 / 11 / 21

Requester's Information				
Name: <u>Kathryne Nicole Salazar</u>		Title: <u>Accounting Clerk</u>		
Office: <u>Finance Section</u>		Building/Room/Flr:		
Phone:		Email Address:		
Request Information				
Type of request:				
<input type="checkbox"/> Technical Assistance <input type="checkbox"/> Hardware <input checked="" type="checkbox"/> Software <input type="checkbox"/> Local Area Network <input type="checkbox"/> Information Systems <input type="checkbox"/> Databases <input type="checkbox"/> Database System Assistance (In-house) <input type="checkbox"/> New User <input type="checkbox"/> Change Password <input type="checkbox"/> System Modification <input type="checkbox"/> Website <input type="checkbox"/> Posting <input type="checkbox"/> E-mail Assistance <input type="checkbox"/> Asset/Borrow <input type="checkbox"/> Hardware Components <input type="checkbox"/> Peripherals <input type="checkbox"/> Tools <input type="checkbox"/> Others (specify): _____				
DESCRIPTION OF REQUEST (Please clearly write down the details of the request.)				
<u>Installation of Panasonic KX-SLI 655 DRIVER FOR WINDOWS 10 64 BIT</u>				
Authorization				
All requests for service must be approved by the appropriate supervisor (at least division chief, OIC, immediate supervisor or next in rank staff) of the requester. By signing below the manager/supervisor certifies that the service is required.				
Full Name: <u>JOSEPH M SAE</u>		Position/Title: <u>Accountant III</u>		
Signature: 		Date (mm/dd/yyyy): <u>02 / 11 / 21</u>		
Infrastructure Service Authorization				
All requests for service must be coordinated with and signed by the Chief of PICTu or his/her authorized representative.				
Full Name: <u>J. Micael</u>		Position/Title: <u>IT</u>		
Signature: 		Date (mm/dd/yyyy): <u>8 / 11 / 21</u>		
For PICTu Staff Only (Use Back of Form or Separate sheet if necessary)				
Date	Time	Action Taken	Action Staff	Signature
<u>08/11/2021</u>	<u>02:13 PM</u>	<u>Successfully installed driver</u>	<u>J. Micael</u>	

Feedback Rating: ☒ Excellent ☐ Very Satisfactory ☐ Satisfactory ☐ Unsatisfactory ☐ Poor

Released by:

Received by:

Signature over printed name: J. Micael
Date (mm/dd/yyyy): 8 / 11 / 21

Signature over printed name: _____
Date (mm/dd/yyyy): / /



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Ticket No: 2021-0811-2

Date (mm/dd/yyyy): 08 / 11 / 2021

Requester's Information

Name: <u>Siena Mae Lozada</u>	Title: <u>Office Support Assistant</u>
Office: <u>PENRO Marinduque</u>	Building/Room/Flr: <u>1</u>
Phone:	Email Address:

Request Information

Type of request:

Technical Assistance

☐ Hardware ☒ Software ☐ Local Area Network ☐ Information Systems ☐ Databases

Database System Assistance (In-house)

☐ New User ☐ Change Password ☐ System Modification

Website

☐ Posting ☐ E-mail Assistance

Asset/Borrow

☒ Hardware Components ☐ Peripherals ☐ Tools

☐ Others (specify): _____

DESCRIPTION OF REQUEST (Please clearly write down the details of the request.)

Request to borrow and install scanner to be use in accounting unit.

Authorization

All requests for service must be approved by the appropriate **supervisor (at least division chief, OIC, immediate supervisor or next in rank staff)** of the requester. By signing below the manager/supervisor certifies that the service is required.

Full Name: Lorelyn P. Sait Position/Title: Accountant III

Signature

08 / 11 / 2021
Date (mm/dd/yyyy):

Infrastructure Service Authorization

All requests for service must be coordinated with and signed by the Chief of PICTu or his/her authorized representative.

Full Name: J. Miron Position/Title: IT

Signature

8 / 11 / 21
Date (mm/dd/yyyy):

For PICTu Staff Only (Use Back of Form or Separate sheet if necessary)

Date	Time	Action Taken	Action Staff	Signature
<u>08/11/2021</u>	<u>09:22 AM</u>	<u>Successfully installed scanner</u>	<u>J. Miron</u>	<u>J.</u>

Feedback Rating: ☒ Excellent ☐ Very Satisfactory ☐ Satisfactory ☐ Unsatisfactory ☐ Poor

Released by:


Received by:

Signature over printed name

08 / 11 / 21
Date (mm/dd/yyyy)

SIENA MAE LOZADA
Signature over printed name

08 / 11 / 2021
Date (mm/dd/yyyy)

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Ticket No: 2021-0812-1 Date (mm/dd/yyyy): 08 / 12 / 2021

Requester's Information	
Name: <u>RANDY R. PANTOJA</u>	Title: <u>PTI</u>
Office: <u>CDS/TSD/PENRO</u>	Building/Room/Flr: <u>TSD / 1st Floor</u>
Phone:	Email Address:

Request Information	
Type of request:	
Technical Assistance <input type="checkbox"/> Hardware <input checked="" type="checkbox"/> Software <input type="checkbox"/> Local Area Network <input type="checkbox"/> Information Systems <input type="checkbox"/> Databases Database System Assistance (In-house) <input type="checkbox"/> New User <input type="checkbox"/> Change Password <input type="checkbox"/> System Modification Website <input type="checkbox"/> Posting <input type="checkbox"/> E-mail Assistance Asset/Borrow <input type="checkbox"/> Hardware Components <input type="checkbox"/> Peripherals <input type="checkbox"/> Tools <input type="checkbox"/> Others (specify): _____	

DESCRIPTION OF REQUEST (Please clearly write down the details of the request.)
<u>ArcGIS license renewal</u>

Authorization	
All requests for service must be approved by the appropriate supervisor (at least division chief, OIC, immediate supervisor or next in rank staff) of the requester. By signing below the manager/supervisor certifies that the service is required.	
Full Name:	Position/Title:


<u>[Signature]</u> Signature	<u>08 / 12 / 2021</u> Date (mm/dd/yyyy):
---------------------------------	---

Infrastructure Service Authorization	
All requests for service must be coordinated with and signed by the Chief of PICTu or his/her authorized representative.	
Full Name: <u>Mark Ryan S. Lirio</u>	Position/Title: <u>ISAT</u>
<u>[Signature]</u> Signature	<u>08 / 12 / 2021</u> Date (mm/dd/yyyy):

For PICTu Staff Only (Use Back of Form or Separate sheet if necessary)				
Date	Time	Action Taken	Action Staff	Signature
<u>08/12/2021</u>	<u>01:45 PM</u>	<u>ArcGIS license renewal successful</u>	<u>MLirio</u>	<u>[Signature]</u>

Feedback Rating: <input checked="" type="checkbox"/> Excellent <input type="checkbox"/> Very Satisfactory <input type="checkbox"/> Satisfactory <input type="checkbox"/> Unsatisfactory <input type="checkbox"/> Poor

Released by: <u>[Signature]</u> Signature over printed name	<u>08 / 12 / 2021</u> Date (mm/dd/yyyy)	Received by: _____ Signature over printed name	<u> / / </u> Date (mm/dd/yyyy)
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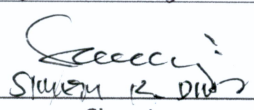
Reminder: Please complete this form and submit it at the PICTu service desk located at 2nd flr. DENR PENRO Main Bldg., or email a scanned copy to penromarinduque@denr.gov.ph. Once processed, a Technical Support Representative will contact you to schedule service.


Ticket No: 2021-0812-2 Date (mm/dd/yyyy): 08 / 12 / 2021

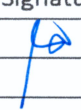
Requester's Information	
Name: <u>DON GIBSON D. MERCADO</u>	Title: _____
Office: <u>PENRO MARINDUQUE</u>	Building/Room/Flr: _____
Phone: _____	Email Address: _____

Request Information	
Type of request:	
Technical Assistance <input type="checkbox"/> Hardware <input checked="" type="checkbox"/> Software <input type="checkbox"/> Local Area Network <input type="checkbox"/> Information Systems <input type="checkbox"/> Databases Database System Assistance (In-house) <input type="checkbox"/> New User <input type="checkbox"/> Change Password <input type="checkbox"/> System Modification Website <input type="checkbox"/> Posting <input type="checkbox"/> E-mail Assistance Asset/Borrow <input type="checkbox"/> Hardware Components <input type="checkbox"/> Peripherals <input type="checkbox"/> Tools <input type="checkbox"/> Others (specify): _____	


DESCRIPTION OF REQUEST (Please clearly write down the details of the request.)
<u>Archis license renewal</u>

Authorization	
All requests for service must be approved by the appropriate supervisor (at least division chief, OIC, immediate supervisor or next in rank staff) of the requester. By signing below the manager/supervisor certifies that the service is required.	
Full Name: <u>SYMEON R. DIAS</u>	Position/Title: <u>LMD II / Chief, RPS</u>
 Signature	<u>08 / 13 / 2021</u> Date (mm/dd/yyyy):

Infrastructure Service Authorization	
All requests for service must be coordinated with and signed by the Chief of PICTu or his/her authorized representative.	
Full Name: <u>Mark Ryan S. Urada</u>	Position/Title: <u>ISAN</u>
 Signature	<u>08 / 12 / 2021</u> Date (mm/dd/yyyy):

For PICTu Staff Only (Use Back of Form or Separate sheet if necessary)				
Date	Time	Action Taken	Action Staff	Signature
<u>08/12/2021</u>	<u>10:28 AM</u>	<u>successful license renewal</u>	<u>MRUrada</u>	

Feedback Rating: <input checked="" type="checkbox"/> Excellent <input type="checkbox"/> Very Satisfactory <input type="checkbox"/> Satisfactory <input type="checkbox"/> Unsatisfactory <input type="checkbox"/> Poor

Released by: 	Received by: _____
Signature over printed name	Signature over printed name
<u>8/12/21</u>	<u> / / </u>
Date (mm/dd/yyyy)	Date (mm/dd/yyyy)

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Ticket No: 2021-0813-1 Date (mm/dd/yyyy): 8/13/21

Requester's Information	
Name: <u>Julomy H. Mahayog</u>	Title: <u>Forester</u>
Office: <u>Perik</u>	Building/Room/Fir:
Phone:	Email Address:

Request Information	
Type of request:	
<input type="checkbox"/> Technical Assistance <input type="checkbox"/> Hardware <input type="checkbox"/> Software <input type="checkbox"/> Local Area Network <input type="checkbox"/> Information Systems <input type="checkbox"/> Databases <input type="checkbox"/> Database System Assistance (In-house) <input type="checkbox"/> New User <input type="checkbox"/> Change Password <input type="checkbox"/> System Modification <input type="checkbox"/> Website <input type="checkbox"/> Posting <input type="checkbox"/> E-mail Assistance <input type="checkbox"/> Asset/Borrow <input checked="" type="checkbox"/> Hardware Components <input type="checkbox"/> Peripherals <input type="checkbox"/> Tools <input type="checkbox"/> Others (specify): <u>Guh TACKER</u>	

DESCRIPTION OF REQUEST (Please clearly write down the details of the request.)	
<u>Guh TACKER FOR TREE PLANTING</u>	

Authorization	
All requests for service must be approved by the appropriate supervisor (at least division chief, OIC, immediate supervisor or next in rank staff) of the requester. By signing below the manager/supervisor certifies that the service is required.	
Full Name:	Position/Title:
<u>Signature</u>	<u>Date (mm/dd/yyyy): 8/13/21</u>

Infrastructure Service Authorization	
All requests for service must be coordinated with and signed by the Chief of PICTu or his/her authorized representative.	
Full Name:	Position/Title:
<u>Signature</u>	<u>Date (mm/dd/yyyy): 8/13/21</u>

For PICTu Staff Only (Use Back of Form or Separate sheet if necessary)				
Date	Time	Action Taken	Action Staff	Signature
<u>08/13/21</u>	<u>03:27 PM</u>	<u>Approved for release of tacker</u>	<u>J. Mahayog</u>	<u>Signature</u>

Feedback Rating: <input checked="" type="checkbox"/> Excellent <input type="checkbox"/> Very Satisfactory <input type="checkbox"/> Satisfactory <input type="checkbox"/> Unsatisfactory <input type="checkbox"/> Poor

Released by: <u>Signature</u>	Received by: <u>Signature</u>
Signature over printed name	Signature over printed name
<u>8/13/21</u>	<u>8/13/21</u>
Date (mm/dd/yyyy)	Date (mm/dd/yyyy)

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Ticket No: 2021-0816-1 Date (mm/dd/yyyy): 08 / 16 / 2021

Requester's Information	
Name: <u>ERICKA L. MACUNAT</u>	Position/Designation: <u>Admin Aide VI / FINANCE</u>
Office: <u>DENR PENRO MARINDUQUE</u>	Building/Room/Flr:
Phone:	Email Address:

Request Information	
Type of request:	
<input type="checkbox"/> Technical Assistance <input type="checkbox"/> Hardware <input type="checkbox"/> Software <input type="checkbox"/> Local Area Network <input type="checkbox"/> Information Systems <input type="checkbox"/> Databases <input type="checkbox"/> Database System Assistance (In-house) <input type="checkbox"/> New User <input type="checkbox"/> Change Password <input type="checkbox"/> System Modification <input type="checkbox"/> Website <input type="checkbox"/> Posting <input type="checkbox"/> E-mail Assistance <input type="checkbox"/> Asset/Borrow <input checked="" type="checkbox"/> Hardware Components <input checked="" type="checkbox"/> Peripherals <input type="checkbox"/> Tools <input type="checkbox"/> Others (specify): _____	

DESCRIPTION OF REQUEST (Please clearly write down the details of the request.)
<u>LCD Projector, Web Cam for the conduct of Entrance Conference 2021 on August 24, 2021 via Zoom</u>

Authorization	
All requests for service must be approved by the appropriate supervisor (at least division chief, OIC, immediate supervisor or next in rank staff) of the requester. By signing below the manager/supervisor certifies that the service is required.	
Full Name: <u>LORELYN R. SACT</u>	Position/Title: <u>ACCOUNTANT III</u>
Signature: _____	Date (mm/dd/yyyy): <u>08 / 16 / 2021</u>

Infrastructure Service Authorization	
All requests for service must be coordinated with and signed by the Chief of PICTu or his/her authorized representative.	
Full Name: <u>JJ Miao</u>	Position/Title: <u>IT</u>
Signature: _____	Date (mm/dd/yyyy): <u>8 / 17 / 21</u>

For PICTu Staff Only (Use Back of Form or Separate sheet if necessary)				
Date	Time	Action Taken	Action Staff	Signature
<u>08/17/2021</u>	<u>01:46 PM</u>	<u>Approved for release of equipment</u>	<u>JJ Miao</u>	<u>[Signature]</u>

Feedback Rating: <input checked="" type="checkbox"/> Excellent <input type="checkbox"/> Very Satisfactory <input type="checkbox"/> Satisfactory <input type="checkbox"/> Unsatisfactory <input type="checkbox"/> Poor
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Released by: _____ Signature over printed name	<u>8 / 17 / 21</u> Date (mm/dd/yyyy)	Received by: _____ Signature over printed name	<u>08 / 16 / 2021</u> Date (mm/dd/yyyy)
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Ticket No: 2021-0816-2

Date (mm/dd/yyyy): 08 / 16 / 2021

Requester's Information	
Name: <u>Carlo M. Watiwat</u>	Position/Designation: <u>Forest Technician II</u>
Office: <u>DENR-PENRO</u>	Building/Room/Flr: <u>TD</u>
Phone:	Email Address:

Request Information	
Type of request:	
Technical Assistance <input checked="" type="checkbox"/> Hardware <input type="checkbox"/> Software <input type="checkbox"/> Local Area Network <input type="checkbox"/> Information Systems <input type="checkbox"/> Databases	
Database System Assistance (In-house) <input type="checkbox"/> New User <input type="checkbox"/> Change Password <input type="checkbox"/> System Modification	
Website <input type="checkbox"/> Posting <input type="checkbox"/> E-mail Assistance	
Asset/Borrow <input type="checkbox"/> Hardware Components <input type="checkbox"/> Peripherals <input type="checkbox"/> Tools	
<input type="checkbox"/> Others (specify): _____	

DESCRIPTION OF REQUEST (Please clearly write down the details of the request.)
<u>Epson L360 printer installation (FT II Carlo Watiwat - COS)</u>

Authorization	
All requests for service must be approved by the appropriate supervisor (at least division chief, OIC, immediate supervisor or next in rank staff) of the requester. By signing below the manager/supervisor certifies that the service is required.	
Full Name: <u>CARLO M. WATIWAT</u>	Position/Title: <u>FOREST TECHNICIAN II</u>
<u>[Signature]</u> Signature	<u>08 / 16 / 2021</u> Date (mm/dd/yyyy):

Infrastructure Service Authorization	
All requests for service must be coordinated with and signed by the Chief of PICTu or his/her authorized representative.	
Full Name: <u>Mark Ryan S. Wzade</u>	Position/Title: <u>ISA II</u>
<u>[Signature]</u> Signature	<u>08 / 16 / 2021</u> Date (mm/dd/yyyy):

For PICTu Staff Only (Use Back of Form or Separate sheet if necessary)				
Date	Time	Action Taken	Action Staff	Signature
<u>08/16/2021</u>	<u>03:27 PM</u>	<u>Installation Successful</u>	<u>MPWzade</u>	<u>[Signature]</u>

Feedback Rating: <input type="checkbox"/> Excellent <input checked="" type="checkbox"/> Very Satisfactory <input type="checkbox"/> Satisfactory <input type="checkbox"/> Unsatisfactory <input type="checkbox"/> Poor
--

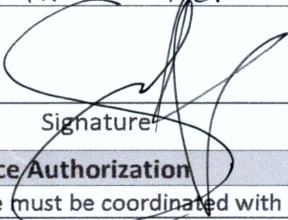
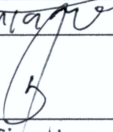

Released by: <u>[Signature]</u> Signature over printed name	<u>8/16/21</u> Date (mm/dd/yyyy)	Received by: <u> </u> Signature over printed name	<u> </u> Date (mm/dd/yyyy)
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Reminder: Please complete this form and submit it at the PICTu service desk located at 2nd flr. DENR PENRO Main Bldg., or email a scanned copy to penromarinduque@denr.gov.ph. Once processed, a Technical Support Representative will contact you to schedule service.

Ticket No: 2021-0817-1

Date (mm/dd/yyyy): 8 / 17 / 21

Requester's Information				
Name: <u>ERICKA L. MACUNAT</u>		Position/Designation: <u>Admin. Aide / FINANCE</u>		
Office: <u>DENR PENRO MARINDUQUE</u>		Building/Room/Flr:		
Phone:		Email Address:		
Request Information				
Type of request:				
Technical Assistance <input type="checkbox"/> Hardware <input type="checkbox"/> Software <input type="checkbox"/> Local Area Network <input type="checkbox"/> Information Systems <input type="checkbox"/> Databases				
Database System Assistance (In-house) <input type="checkbox"/> New User <input type="checkbox"/> Change Password <input type="checkbox"/> System Modification				
Website <input type="checkbox"/> Posting <input type="checkbox"/> E-mail Assistance				
Asset/Borrow <input type="checkbox"/> Hardware Components <input type="checkbox"/> Peripherals <input type="checkbox"/> Tools				
<input checked="" type="checkbox"/> Others (specify): <u>Zoom meeting</u>				
DESCRIPTION OF REQUEST (Please clearly write down the details of the request.)				
<u>Provide technical assistance (audio & video) on the conduct of Entrance Conference 2021 on August 24, 2021 via Zoom</u>				
Authorization				
All requests for service must be approved by the appropriate supervisor (at least division chief, OIC, immediate supervisor or next in rank staff) of the requester. By signing below the manager/supervisor certifies that the service is required.				
Full Name: <u>LORELYN P. SAET</u>		Position/Title: <u>ACCOUNTANT III</u>		
Signature: 		Date (mm/dd/yyyy): <u>8 / 17 / 21</u>		
Infrastructure Service Authorization				
All requests for service must be coordinated with and signed by the Chief of PICTu or his/her authorized representative.				
Full Name: <u>J. M. M.</u>		Position/Title: <u>IT</u>		
Signature: 		Date (mm/dd/yyyy): <u>8 / 17 / 21</u>		
For PICTu Staff Only (Use Back of Form or Separate sheet if necessary)				
Date	Time	Action Taken	Action Staff	Signature
<u>08/24/2021</u>	<u>07:52 AM</u>	<u>Provided technical assistance for the activity</u>	<u>J. M. M.</u>	

Feedback Rating: ☒ Excellent ☐ Very Satisfactory ☐ Satisfactory ☐ Unsatisfactory ☐ Poor

Released by:


Received by:

Signature over printed name

Date (mm/dd/yyyy)

Signature over printed name

Date (mm/dd/yyyy)

	DENR-PENRO Marinduque	Page No.	Page 1
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Reminder: Please complete this form and submit it at the PICTu service desk located at 2nd flr. DENR PENRO Main Bldg., or email a scanned copy to penromarinduque@denr.gov.ph. Once processed, a Technical Support Representative will contact you to schedule service.


Ticket No: 2021-0817-2 Date (mm/dd/yyyy): 8/17/21

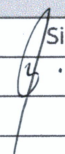
Requester's Information	
Name: <u>Nina Jane Mendoza</u>	Title: <u>F.E.O</u>
Office: <u>DEUR</u>	Building/Room/Flr: <u>NGP</u>
Phone:	Email Address:

Request Information	
Type of request:	
<input type="checkbox"/> Technical Assistance <input type="checkbox"/> Hardware <input type="checkbox"/> Software <input type="checkbox"/> Local Area Network <input type="checkbox"/> Information Systems <input type="checkbox"/> Databases <input type="checkbox"/> Database System Assistance (In-house) <input type="checkbox"/> New User <input type="checkbox"/> Change Password <input type="checkbox"/> System Modification <input type="checkbox"/> Website <input type="checkbox"/> Posting <input type="checkbox"/> E-mail Assistance <input type="checkbox"/> Asset/Borrow <input type="checkbox"/> Hardware Components <input type="checkbox"/> Peripherals <input type="checkbox"/> Tools <input checked="" type="checkbox"/> Others (specify): <u>DEUR WIFI ACCESS</u>	

DESCRIPTION OF REQUEST (Please clearly write down the details of the request.)
<u>FOR INTERNET CONNECTION 7 Days</u>

Authorization	
All requests for service must be approved by the appropriate supervisor (at least division chief, OIC, immediate supervisor or next in rank staff) of the requester. By signing below the manager/supervisor certifies that the service is required.	
Full Name: <u>Maria Elena Paragay</u>	Position/Title: <u>Procter I NGP coordinator</u>
 Signature	<u>8/10/2021</u> Date (mm/dd/yyyy):

Infrastructure Service Authorization	
All requests for service must be coordinated with and signed by the Chief of PICTu or his/her authorized representative.	
Full Name: <u>J. M. M. M.</u>	Position/Title:
 Signature	<u>8/17/21</u> Date (mm/dd/yyyy):

For PICTu Staff Only (Use Back of Form or Separate sheet if necessary)				
Date	Time	Action Taken	Action Staff	Signature
<u>08/17/2021</u>	<u>09:40 AM</u>	<u>Provided internet connection</u>	<u>J. M. M. M.</u>	

Feedback Rating: <input checked="" type="checkbox"/> Excellent <input type="checkbox"/> Very Satisfactory <input type="checkbox"/> Satisfactory <input type="checkbox"/> Unsatisfactory <input type="checkbox"/> Poor

Released by: [Signature]
 Signature over printed name 8/17/21
 Date (mm/dd/yyyy)

Received by: [Signature]
 Signature over printed name 8/17/21
 Date (mm/dd/yyyy)



SERVICE REQUEST FORM (SRF)

Reminder: Please complete this form and submit it at the PICTu service desk located at 2nd flr. DENR PENRO Main Bldg., or email a scanned copy to penromarinduque@denr.gov.ph. Once processed, a Technical Support Representative will contact you to schedule service.

Ticket No: 2021-0823-1

Date (mm/dd/yyyy): 08 / 23 / 2021

Requester's Information

Name: Genneth V. Panuelos

Title: Information officer

Office: TSD

Building/Room/Flr:

Phone:

Email Address:

Request Information

Type of request:

Technical Assistance

☒ Hardware

☐ Software

☐ Local Area Network

☐ Information Systems

☐ Databases

Database System Assistance (In-house)

☐ New User

☐ Change Password

☐ System Modification

Website

☐ Posting

E-mail

☐ Assistance

Asset/Borrow

☐ Hardware Components

☐ Peripherals

☐ Tools

☐ Others (specify):

DESCRIPTION OF REQUEST (Please clearly write down the details of the request.)

Reset was to PAB PABMA L3110 EPCON

Authorization

All requests for service must be approved by the appropriate **supervisor (at least division chief, OIC, immediate supervisor or next in rank staff)** of the requester. By signing below the manager/supervisor certifies that the service is required.

Full Name: Cynthia U. Lozano

Position/Title: Chief, Technical Services Division

Signature

08 / 23 / 21
Date (mm/dd/yyyy):

Infrastructure Service Authorization

All requests for service must be coordinated with and signed by the Chief of PICTu or his/her authorized representative.

Full Name: JJ Miking

Position/Title:

Signature

8 / 22 / 21
Date (mm/dd/yyyy):

For PICTu Staff Only (Use Back of Form or Separate sheet if necessary)

Date	Time	Action Taken	Action Staff	Signature
<u>08/23/2021</u>	<u>11:12 AM</u>	<u>Wastepad successfully reset</u>	<u>JJ Miking</u>	<u>[Signature]</u>

Feedback Rating: ☒ Excellent

☐ Very Satisfactory

☐ Satisfactory

☐ Unsatisfactory

☐ Poor

Released by:

Signature over printed name

8 / 23 / 21
Date (mm/dd/yyyy)

Received by:

Genneth V. Panuelos
Signature over printed name

8 / 23 / 21
Date (mm/dd/yyyy)



DENR-PENRO Marinduque
PENRO Information and Communication Technology Unit (PICTu)

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Ticket No: 2021-0823-2

Date (mm/dd/yyyy): 8/23/21

Requester's Information

Name: RANDY R. PANTONA

Position/Designation: PT-1

Division/Section/Unit: TSD/CDS/BMU

Building/Room/Flr: TSD

Phone:

Email Address:

Request Information

Type of request:

Technical Assistance

☐ Hardware

☒ Software

☐ Local Area Network

☐ Information Systems

☐ Databases

Database System Assistance (In-house)

☐ New User

☐ Change Password

☐ System Modification

Website

☐ Posting

E-mail

☐ Assistance

Asset/Borrow

☐ Hardware Components

☐ Peripherals

☐ Tools

☐ Others (specify):

DESCRIPTION OF REQUEST (Please clearly write down the details of the request.)

ArcGIS installation (ArcGIS Desktop 10.8, ArcGIS Pro 2.7, open VPN)

Authorization

All requests for service must be approved by the appropriate **supervisor (at least division chief, OIC, immediate supervisor or next in rank staff)** of the requester. By signing below the manager/supervisor certifies that the service is required.

Supervisor's Full Name: ALETH C. BUNDOC

Supervisor's Position/Title: CDO II/Chief, CDS

Bundoc
Supervisor's Signature

8/23/2021
Date (mm/dd/yyyy):

Infrastructure Service Authorization

All requests for service must be coordinated with and signed by the Chief of PICTu or his/her authorized representative.

Full Name: Mark Ryan S. Lorada

Position/Title: ISA II

MLorada
Signature

08/23/2021
Date (mm/dd/yyyy):

For PICTu Staff Only (Use Back of Form or Separate sheet if necessary)

Date	Time	Action Taken	Action Staff	Signature
<u>08/23/2021</u>	<u>09:50 AM</u>	<u>ArcGIS installation successful</u>	<u>MLorada</u>	<u>MLorada</u>

Feedback Rating: ☒ Excellent

☐ Very Satisfactory

☐ Satisfactory

☐ Unsatisfactory

☐ Poor

Released by:

Received by:

MLorada
Signature over printed name

8/23/21
Date (mm/dd/yyyy)

MLorada
Signature over printed name

8/23/21
Date (mm/dd/yyyy)



DENR-PENRO Marinduque
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Ticket No: 2021-0824-01

Date (mm/dd/yyyy): 08 / 24 / 2021

Requester's Information

Name: Siena Mae Lozada

Title: Office Support Staff

Office: PENRO Marinduque

Building/Room/Fir: 1

Phone:

Email Address:

Request Information

Type of request:

Technical Assistance

☐ Hardware

☒ Software

☐ Local Area Network

☐ Information Systems

☐ Databases

Database System Assistance (In-house)

☐ New User

☐ Change Password

☐ System Modification

Website

☐ Posting

E-mail

☐ Assistance

Asset/Borrow

☐ Hardware Components

☐ Peripherals

☐ Tools

☐ Others (specify): _____

DESCRIPTION OF REQUEST (Please clearly write down the details of the request.)

Re-installation of Microsoft Excel (DENR-R4M-1320-4A)

Authorization

All requests for service must be approved by the appropriate supervisor (at least division chief, OIC, immediate supervisor or next in rank staff) of the requester. By signing below the manager/supervisor certifies that the service is required.

Full Name: Anidel M. Feliciano

Position/Title: Admin Officer IV/Budget Officer II

[Signature]
Signature

08 / 24 / 2021

Date (mm/dd/yyyy):

Infrastructure Service Authorization

All requests for service must be coordinated with and signed by the Chief of PICTu or his/her authorized representative.

Full Name: J. M. Garcia

Position/Title:

[Signature]
Signature

8 / 24 / 21

Date (mm/dd/yyyy):

For PICTu Staff Only (Use Back of Form or Separate sheet if necessary)

Date	Time	Action Taken	Action Staff	Signature
<u>08/24/2021</u>	<u>08:47 AM</u>	<u>Successfully re-installed the MS Excel</u>	<u>J. M. Garcia</u>	<u>[Signature]</u>

Feedback Rating: ☒ Excellent ☐ Very Satisfactory ☐ Satisfactory ☐ Unsatisfactory ☐ Poor

Released by:

Received by:

[Signature]
Signature over printed name

8 / 24 / 21


Date (mm/dd/yyyy)

Siena Mae Lozada

Signature over printed name

08 / 24 / 2021

Date (mm/dd/yyyy)

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Ticket No: 2021-0827-1 Date (mm/dd/yyyy): 8/27/21

Requester's Information	
Name: <u>PRO Acem</u>	Position/Designation: <u>AOI</u>
Division/Section/Unit: <u>COM</u>	Building/Room/Fir: _____
Phone: _____	Email Address: _____

Request Information	
Type of request:	
<input type="checkbox"/> Technical Assistance <input type="checkbox"/> Hardware <input type="checkbox"/> Software <input type="checkbox"/> Local Area Network <input type="checkbox"/> Information Systems <input type="checkbox"/> Databases <input type="checkbox"/> Database System Assistance (In-house) <input type="checkbox"/> New User <input type="checkbox"/> Change Password <input type="checkbox"/> System Modification <input checked="" type="checkbox"/> Website Posting <input type="checkbox"/> E-mail Assistance <input type="checkbox"/> Asset/Borrow <input type="checkbox"/> Hardware Components <input type="checkbox"/> Peripherals <input type="checkbox"/> Tools <input type="checkbox"/> Others (specify): _____	

DESCRIPTION OF REQUEST (Please clearly write down the details of the request.)
<u>Website Posting of FY 2022 Annual Procurement Plan (APP) of DENR-PENRO Marinduque</u>


Authorization	
All requests for service must be approved by the appropriate supervisor (at least division chief, OIC, immediate supervisor or next in rank staff) of the requester. By signing below the manager/supervisor certifies that the service is required.	
Supervisor's Full Name: <u>EDEN P. PALACIOS</u>	Supervisor's Position/Title: <u>Administrative Officer IV</u>
<u>EPalacios</u> Supervisor's Signature	<u>Aug. 27, 2021</u> Date (mm/dd/yyyy):

Infrastructure Service Authorization	
All requests for service must be coordinated with and signed by the Chief of PICTu or his/her authorized representative.	
Full Name: <u>Mark Ryan S. Wrada</u>	Position/Title: <u>ISAT</u>
<u>for</u> Signature	<u>08/27/2021</u> Date (mm/dd/yyyy):

For PICTu Staff Only (Use Back of Form or Separate sheet if necessary)				
Date	Time	Action Taken	Action Staff	Signature
<u>08/27/2021</u>	<u>02:44PM</u>	<u>FY2022APP Posted at PENRO website</u>	<u>MRWrada</u>	<u>for</u>

Feedback Rating: <input checked="" type="checkbox"/> Excellent <input type="checkbox"/> Very Satisfactory <input type="checkbox"/> Satisfactory <input type="checkbox"/> Unsatisfactory <input type="checkbox"/> Poor

Released by: <u>G.</u>	Received by: _____
Signature over printed name	Signature over printed name
<u>8/31/21</u>	<u>8/31/21</u>
Date (mm/dd/yyyy)	Date (mm/dd/yyyy)

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Reminder: Please complete this form and submit it at the PICTu service desk located at 2nd flr. DENR PENRO Main Bldg., or email a scanned copy to penromarinduque@denr.gov.ph. Once processed, a Technical Support Representative will contact you to schedule service.

Ticket No: 2021-0827-2 Date (mm/dd/yyyy): 08 / 27 / 2021

Requester's Information	
Name: <u>EDEN R PALACIOS</u>	Position/Designation: <u>AO IV</u>
Division/Section/Unit: <u>Administrative Unit</u>	Building/Room/Flr:
Phone:	Email Address:

Request Information	
Type of request:	
<input type="checkbox"/> Technical Assistance <input type="checkbox"/> Hardware <input checked="" type="checkbox"/> Software <input type="checkbox"/> Local Area Network <input type="checkbox"/> Information Systems <input type="checkbox"/> Databases <input type="checkbox"/> Database System Assistance (In-house) <input type="checkbox"/> New User <input type="checkbox"/> Change Password <input type="checkbox"/> System Modification <input type="checkbox"/> Website <input type="checkbox"/> Posting <input type="checkbox"/> E-mail Assistance <input type="checkbox"/> Asset/Borrow <input type="checkbox"/> Hardware Components <input type="checkbox"/> Peripherals <input type="checkbox"/> Tools <input type="checkbox"/> Others (specify): _____	

DESCRIPTION OF REQUEST (Please clearly write down the details of the request.)
<u>Installation of Panasonic KX scanner to AOW Eden Palacios laptop</u>

Authorization	
All requests for service must be approved by the appropriate supervisor (at least division chief, OIC, immediate supervisor or next in rank staff) of the requester. By signing below the manager/supervisor certifies that the service is required.	
Supervisor's Full Name: <u>EDEN R PALACIOS</u>	Supervisor's Position/Title: <u>AO IV</u>
<u>[Signature]</u> Supervisor's Signature	<u>Aug. 27, 2021</u> Date (mm/dd/yyyy):

Infrastructure Service Authorization	
All requests for service must be coordinated with and signed by the Chief of PICTu or his/her authorized representative.	
Full Name: <u>JJ M. GARD</u>	Position/Title: <u>IT</u>
<u>[Signature]</u> Signature	<u>8 / 27 / 21</u> Date (mm/dd/yyyy):

For PICTu Staff Only (Use Back of Form or Separate sheet if necessary)				
Date	Time	Action Taken	Action Staff	Signature
<u>08/27/2021</u>	<u>02:14 PM</u>	<u>Successfully installed scanner</u>	<u>JJ M. GARD</u>	<u>[Signature]</u>

Feedback Rating: <input checked="" type="checkbox"/> Excellent <input type="checkbox"/> Very Satisfactory <input type="checkbox"/> Satisfactory <input type="checkbox"/> Unsatisfactory <input type="checkbox"/> Poor

Released by: <u>[Signature]</u>	Received by: _____
Signature over printed name	Signature over printed name
<u>8 / 27 / 21</u>	<u>1 / 1</u>
Date (mm/dd/yyyy)	Date (mm/dd/yyyy)


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Ticket No: 2021-0831-1 Date (mm/dd/yyyy): 08 / 31 / 2021

Requester's Information				
Name: <u>BLESILDA CONSTANTINO</u>		Position/Designation: <u>ADA V</u>		
Division/Section/Unit: <u>PAND</u>		Building/Room/Flr: <u>PAND</u>		
Phone: <u>POCO X3 PRO</u>		Email Address: <u>TIGER31774@GMAIL.COM</u>		
Request Information				
Type of request:				
<input type="checkbox"/> Technical Assistance <input type="checkbox"/> Hardware <input type="checkbox"/> Software <input type="checkbox"/> Local Area Network <input type="checkbox"/> Information Systems <input type="checkbox"/> Databases <input type="checkbox"/> Database System Assistance (In-house) <input type="checkbox"/> New User <input type="checkbox"/> Change Password <input type="checkbox"/> System Modification <input type="checkbox"/> Website <input type="checkbox"/> Posting <input type="checkbox"/> E-mail Assistance <input type="checkbox"/> Asset/Borrow <input type="checkbox"/> Hardware Components <input type="checkbox"/> Peripherals <input type="checkbox"/> Tools <input checked="" type="checkbox"/> Others (specify): <u>wlan access</u>				
DESCRIPTION OF REQUEST (Please clearly write down the details of the request.)				
<u>internet access for CP</u>				
Authorization				
All requests for service must be approved by the appropriate supervisor (at least division chief, OIC, immediate supervisor or next in rank staff) of the requester. By signing below the manager/supervisor certifies that the service is required.				
Supervisor's Full Name:		Supervisor's Position/Title:		
_____ Supervisor's Signature		_____ Date (mm/dd/yyyy):		
Infrastructure Service Authorization				
All requests for service must be coordinated with and signed by the Chief of PICTu or his/her authorized representative.				
Full Name: <u>J. M. ...</u>		Position/Title: <u>...</u>		
_____ Signature		_____ Date (mm/dd/yyyy):		
For PICTu Staff Only (Use Back of Form or Separate sheet if necessary)				
Date	Time	Action Taken	Action Staff	Signature
<u>08/31/2021</u>	<u>02:11 PM</u>	<u>Provided internet connection</u>	<u>J. M. ...</u>	<u>[Signature]</u>

Feedback Rating: <input checked="" type="checkbox"/> Excellent <input type="checkbox"/> Very Satisfactory <input type="checkbox"/> Satisfactory <input type="checkbox"/> Unsatisfactory <input type="checkbox"/> Poor
Released by: <u>[Signature]</u> Date (mm/dd/yyyy): <u>8/31/21</u>
Received by: _____ Date (mm/dd/yyyy): <u> / / </u>
Signature over printed name

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Reminder: Please complete this form and submit it at the PICTu service desk located at 2nd flr. DENR PENRO Main Bldg., or email a scanned copy to penromarinduque@denr.gov.ph. Once processed, a Technical Support Representative will contact you to schedule service.

Ticket No: 2021-0831-2 Date (mm/dd/yyyy): 8 / 31 / 2021

Requester's Information	
Name: <u>EDEN P. PALACIOS</u>	Position/Designation: <u>AD IV</u>
Division/Section/Unit: <u>Administrative Section</u>	Building/Room/Flr:
Phone:	Email Address:

Request Information	
Type of request:	
Technical Assistance <input type="checkbox"/> Hardware <input type="checkbox"/> Software <input type="checkbox"/> Local Area Network <input type="checkbox"/> Information Systems <input checked="" type="checkbox"/> Databases Database System Assistance (In-house) <input type="checkbox"/> New User <input type="checkbox"/> Change Password <input type="checkbox"/> System Modification Website <input type="checkbox"/> Posting E-mail <input type="checkbox"/> Assistance Asset/Borrow <input type="checkbox"/> Hardware Components <input type="checkbox"/> Peripherals <input type="checkbox"/> Tools <input type="checkbox"/> Others (specify): _____	

DESCRIPTION OF REQUEST (Please clearly write down the details of the request.)
<u>Biometrics Registration (FEU)</u> <u>MARIA CHRISTINE M. BUNAG (375, 327)</u>

Authorization	
All requests for service must be approved by the appropriate supervisor (at least division chief, OIC, immediate supervisor or next in rank staff) of the requester. By signing below the manager/supervisor certifies that the service is required.	
Supervisor's Full Name: <u>EDEN P. PALACIOS</u>	Supervisor's Position/Title: <u>AD IV</u>
<u>E. Palacios</u> Supervisor's Signature	<u>Aug. 31, 2021</u> Date (mm/dd/yyyy):

Infrastructure Service Authorization	
All requests for service must be coordinated with and signed by the Chief of PICTu or his/her authorized representative.	
Full Name: <u>Mark Ryan S. Cruzada</u>	Position/Title: <u>ICAT</u>
<u>[Signature]</u> Signature	<u>08 / 31 / 2021</u> Date (mm/dd/yyyy):

For PICTu Staff Only (Use Back of Form or Separate sheet if necessary)				
Date	Time	Action Taken	Action Staff	Signature
<u>08/31/2021</u>	<u>01:32 PM</u>	<u>Successfully registered (375, 327)</u>	<u>MM Cruzada</u>	<u>[Signature]</u>

Feedback Rating: <input checked="" type="checkbox"/> Excellent <input type="checkbox"/> Very Satisfactory <input type="checkbox"/> Satisfactory <input type="checkbox"/> Unsatisfactory <input type="checkbox"/> Poor

Released by: [Signature] Date (mm/dd/yyyy): 8/31/21 Received by: _____ Date (mm/dd/yyyy): / /

Signature over printed name Signature over printed name