



### TRIP TICKET

Date Filed: 1/19/2022 Trip Number: \_\_\_\_\_  
 Scheduled Travel Date/s: January 20, 2021 Destination: From Baybay City to Ormoc City & V.V  
 Departure Time: 7:30 AM Driver will report to: Dr. Dennis P. Peque (Pangasugan)  
 Purpose: To attend the 1<sup>st</sup> LNPD TWG meeting in relation to biodiversity concerns.

Head of Party: Dennis P. Peque

Passengers	Department/Office/Center/Project	Contact Number(s)
1. Dennis P. Peque	CFES	09277062843
2. Venice B. Ibañez	DTHM	
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10.		

\*For more than (10) passengers, use separate sheet.

Vehicle Type: \_\_\_\_\_  
 Vehicle Plate No.: \_\_\_\_\_

Requesting party: Dennis P. Peque  
 (POSITION)

Dispatched by: MARLON BURLAS

Motor Pool Services Head

Approved by: \_\_\_\_\_

(Director/Center Director/Agency Head)

**INSTRUCTIONS:** Drivers shall fill in this part properly. Drivers are accountable for and are responsible for reporting any vehicle damage, defects and accidents immediately

Trip Ticket Issued/Received	Vehicle Condition (Before Travel)	Fuel & Lubricant Issued/Used	Departure/Time Out	Odometer/Mileage Out
Date Returned	Vehicle Condition (After Travel)	Fuel & Lubricant Balanced	Arrival/Time In	Odometer/Mileage In

Was the passenger/s following the call time & location? ☐ Yes ☐ No  
 Was there any purchased of fuel/lubricant outside VSU Campus? ☐ Yes (Specify) ☐ No  
 Was the vehicle involved in accident or damaged while in your custody? ☐ Yes (Specify) ☐ No  
 Was the vehicle used other than official government business? ☐ Yes (Specify) ☐ No

Driver's Name & Signature		Filled in by the Head of Party or Requesting Party	
This vehicle will be used for official government business only. I have reviewed and complied with rules & regulations regarding the use of Government-Owned Vehicle.	<b>Service Satisfaction</b> <input type="checkbox"/> 1. Not Satisfied <input type="checkbox"/> 2. Slightly Satisfied <input type="checkbox"/> 3. Moderately Satisfied <input type="checkbox"/> 4. Very Satisfied <input type="checkbox"/> 5. Extremely Satisfied		<b>Driver's OVER ALL RATING</b> <input type="checkbox"/> 1. - Poor <input type="checkbox"/> 2. - Fair <input type="checkbox"/> 3. - Good <input type="checkbox"/> 4. - Very Good <input type="checkbox"/> 5. - Excellent
			<b>Comments &amp; Suggestions</b>
	SIGNATURE OVER PRINTED NAME		Name and Signature