



TRIP TICKET

Date Filed: January 13, 2022 Trip Number: _____
 Scheduled Travel Date/s: January 13, 2022 Destination: Baybay City
 Departure Time: _____ Driver will report to: ODS/USO
 Purpose: To get the 10 sacks of rice for the students (Relief)

Head of Party: Prof. Manolo B. Loreto, Jr.

Passengers	Department/Office/Center/Project	Contact Number(s)
1. Prof. Manolo B. Loreto, Jr.	ODS	09176341432
2.		
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10.		

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

Vehicle Type: _____
 Vehicle Plate No.: _____

Requesting party: Manolo B. Loreto, Jr.
MANOLO B. LORETO, JR.
 Dean of Students

Dispatched by: **MARLON G. BURLAS**
 Head, HELVMU

Approved by: **MARIO LILIO VALENZONA**
 (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.	Service Satisfaction <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		Driver's OVER ALL RATING <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
			Comments & Suggestions
	SIGNATURE OVER PRINTED NAME		Name and Signature