



TRIP TICKET

Date Filed : March 31, 2022 Trip Number :
Scheduled Travel : March 31, 2022 Destination : Brgy. Jaena- Punta Baybay, City
Date/s : Leyte
Departure Time : 9:00AM Driver will report :
to :
Purpose : To conduct site visit in Brgy. Jaena and Punta for WoMangroves project updates

Head of Party: **EDUARDO O. MANGAOANG**

| Passengers | Department/Office/Center/Project | Contact Number(s) |
|-----------------------|----------------------------------|-------------------|
| 1. Rene Jemmar Alkuno | RCCRDC | |
| 2. | | |
| 3. | | |
| 4. | | |
| 5. | | |
| 6. | | |
| 7. | | |
| 8. | | |
| 9. | | |
| 10. | | |

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

Vehicle Type: RCCRDC TOYOTA HILUX
Vehicle Plate No.: AU1296

Requesting party: **EDUARDO O. MANGAOANG**

Professor, Director, Project leader

Dispatched:
AMIEL R. ARMADA

Recommended:
MARLON G. BURLAS

Approved: **EDUARDO O. MANGAOANG**

Maintenance in Charge

Motor Pool Services Head

(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? | Was there any purchased of fuel/lubricant outside VSU Campus? | Was the vehicle involved in accident or damaged while in your custody? | Was the vehicle used other than official government business? |
| <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes (Specify) <input type="checkbox"/> No | <input type="checkbox"/> Yes (Specify) <input type="checkbox"/> No | <input type="checkbox"/> Yes (Specify) <input type="checkbox"/> 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 |