



TRIP TICKET

Date Filed : Aug. 12, 2022 Trip Number : _____
 Scheduled Travel : Aug. 18 & Destination : Ormoc-Tacloban (Aug. 18)
 Date/s : Aug. 19, 2022 : Maasin (Aug. 19)
 Departure Time : 8:00 a.m. Driver will report to : Apartment No.
 Purpose : To visit BSEcon OJT students.

Head of Party: Karl John A. Galvez

Passengers	Department/Office/Center/Project	Contact Number(s)
	DOE	

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

Vehicle Type: Van Requesting party: MARIA HAZEL I. BELLEZAS
 Vehicle Plate No.: _____ Director

Dispatched: AMIEL R. ARMADA Recommended: MARLON G. BURLAS Approved: MARIO LILIO P. VALENZONA
 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			