



TRIP TICKET

Date Filed : October 2, 2025 Trip Number : _____
 Scheduled : October 8, 2025 Destination : Inopacan, Bato, Matalom, Leyte
 Travel Date/s : _____
 Departure Time : 8:00a.m Driver will report to : ISRDS
 Purpose : To conduct social mobilization on BIDANI strategy.

Head of Party: L.B Nuñez

Passengers	Department/Office/Center/Project	Contact Number(s)
1. MP Edullantes		
2. Elia Maury C. Jadina		
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10.		

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

Vehicle Type: _____
 Vehicle Plate No.: _____

Requesting party: *[Signature]*
LILIAN B. NUÑEZ
 (Designation/Position)

Dispatched:
AMIEL R. ARMADA

Recommended:
DODONG NEIL BARRIENTOS

Approved:
MARLON G. BURLAS

In-charge, Rep. & Maint.

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. SIGNATURE OVER PRINTED NAME		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 _____ _____ _____	
_____ Name and Signature			