



**TRIP TICKET**

Date Filed : June 25, 2025  
Scheduled : July 3, 2025  
Travel Date/s :  
Departure Time : 3:00a.m.  
Purpose : To participate in the motorcade, opening program and press conference during the Launching of Nutrition Month 2025 at the Samar Convention Center, Catbalogan City.

Trip Number :  
Destination : Samar Convention Center  
Catbalogan City  
Driver will report to :

Head of Party: Melodina P. Edullantes

Passengers	Department/Office/Center/Project	Contact Number(s)
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10.		

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

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

Requesting party: LILIAN B. NUÑEZ  
(Designation/Position)

Dispatched:  
**MARVIN M. LAO**

Recommended:  
**AMIEL R. ARMADA**

Approved: MARLON G. BURLAS

In-charge, Dispatching

Motor Pool Services, OIC 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

<b>Driver's Name &amp; Signature</b> <i>This vehicle will be used for official government business only. I have reviewed and complied with rules &amp; regulations regarding the use of Government-Owned Vehicle.</i>  <b>SIGNATURE OVER PRINTED NAME</b>	<b>Filled in by the Head of Party or Requesting Party</b>  <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>  <b>Name and Signature</b>
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