



TRIP TICKET

Date Filed : August 12, 2025 Trip Number :
 Scheduled : _____ Destination : Ormoc City, Leyte - Cabintan
 Travel Date/s : August 14, 2025
 Departure Time : 6:00 am Driver will report to : Eco-FARMI
 Purpose : Attend meeting with KAISAHAN NGO and CALCOA.

Head of Party: Marejen A. Villaremo

Passengers	Department/Office/Center/Project	Contact Number(s)
1. Marejen A. Villaremo	Eco-FARMI	
2.		
3.		
4.		
5.		
6.		
7.		

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

Vehicle Type: _____
 Vehicle Plate No.: _____

Requesting party: MAREJEN A. VILLAREMO
 (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

Driver's Name & Signature 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	Filled in by the Head of Party or Requesting Party	
	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	