



TRIP TICKET

Date Filed: June 9, 2022
 Scheduled Travel Date/s: June 10, 2022
 Departure Time: 8:00 AM
 Purpose: Writeshop

Trip Number: _____
 Destination: Baybay City, Leyte
 Driver will report to: Eco-FARMI

Head of Party:

Passengers	Department/Office/Center/Project	Contact Number(s)
1. DHENBER C. LUSANTA	Eco-FARMI	
2. LUDIVICO B. RABIA	Eco-FARMI	
3. HADASHA BONGAT	DBM	
4. GIDEON NIEL TAN	DBM	
5. GRACIELLE DAWN GAMOTIN	DBM	
6. DAISY JEAN LUSANTA	DBM	
7.		
8.		
9.		
10.		

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

Vehicle Type: _____ Requesting party: **DHENBER C. LUSANTA**
 Vehicle Plate No.: _____ Project Leader

Dispatched: _____ Recommended: _____ Approved: **DHENBER C. LUSANTA**
 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	