



TRIP TICKET

Date Filed: Feb 10, 2022 Trip Number: _____
 Scheduled Travel Date/s: Feb 11, 2022 Destination: Baybay Proper -Brgy Bunga
Baybay, City Leyte
 Departure Time: 8:00 AM Driver will report to: Baybay Terminal
 Purpose: To fetch and conduct RCCRDC Staff

Head of Party: **MERLIN R. LEBANTE**

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

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

Vehicle Type: RCCRDC TOYOTA HILUX

Vehicle Plate No.: AU1296

Requesting party:
EDUARDO O. MANGAOANG

Professor, Director, Project leader

Dispatched by: **MARLON G. BURLAS**

Motor Pool Services Head

Approved by:
EDUARDO O. MANGAOANG

(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	Driver's OVER ALL RATING
	<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	<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		