



TRIP TICKET

Date Filed: December 14, 2021 Trip Number: _____

Scheduled Travel Date/s: December 15, 2021 Destination: Dagami, Julita, Pastrana, Santa Fe, Babatngon and Jaro, Leyte

Departure Time: 7:00 am Driver will report to: VSU Main Gate

Purpose: Data Gathering for DA-SAAD Project

Head of Party: _____

Passengers	Department/Office/Center/Project	Contact Number(s)
1. Wendy C. Enerlan	ViSERDAC	
2. Reyvin N. Sabanal	ViSERDAC	
3. Margareth Batistil	ViSERDAC	
4. Ana Liza M. Recto	ViSERDAC	
5. Gwendolin H. Omalay	ViSERDAC	
6.		
7.		
8.		
9.		
10.		

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

Vehicle Type: _____

Vehicle Plate No.: _____

Requesting party: _____

WENDY C. ENERLAN

SRA

Dispatched by: _____

MARLON G. BURLAS

Motor Pool Services Head

Approved by: _____

MARIO LILIO VALENZONA

(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?

☐ Yes

☐ No

Was there any purchased of fuel/lubricant outside VSU Campus?

☐ Yes (Specify)

☐ No

Was the vehicle involved in accident or damaged while in your custody?

☐ Yes (Specify)

☐ No

Was the vehicle used other than official government business?

☐ Yes (Specify)

☐ 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	