



TRIP TICKET

Date Filed : Aug. 03, 2022 Trip Number : _____
 Scheduled Travel Date/s : Aug. 08, 2022 Destination : Baybay, City Leyte
 Departure Time : 8:00 AM Driver will report to : Guard Post 1
 Purpose : To facilitate the deployment of Art Apprenticeship II course BCAED.
 Head of Party: Dr. Charis B. Limbo

Passengers	Department/Office/Center/Project	Contact Number(s)
1. 20 PASSENGERS	Institute Of Human Kinetics	563-7395/1046
2.		
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10.		

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

Vehicle Type: VSU Requesting party: **CHARIS B. LIMBO**
 Vehicle Plate No.: _____ Director, IHK

Dispatched: _____ Recommended: _____ Approved: **MARIO LILIO P. VALENZONA**
 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	
<i>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.</i>	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	