



Trip Ticket No.: _____

DRIVER'S TICKET

A. To be filled out by the General Services Unit (GSU) personnel:

1. Name of driver of the vehicle: _____
2. Government car to be used & Plate No.: _____
3. Name of authorized passenger(s):

4. Place or places to be visited/inspected: _____
5. Purpose: _____
6. Travel Date: _____ Travel Time: _____ AM PM

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VP for Administration and Finance

B. To be filled out by the Driver:

1. Time of departure from the main gate _____ A.M./P.M.
2. Time of arrival at (Item A.4.) _____ A.M./P.M.
3. Time of departure from (Item A.4.) _____ A.M./P.M.
4. Time of arrival back to the main gate _____ A.M./P.M.
5. Approximate distance traveled (to and from) _____ Kilometers
6. Fuel issued, purchased and consumed:
 - a. Balance in tank before the trip _____ Liters
 - b. Issued by office from stock _____ Liters
 - c. Add-Purchased during trip _____ Liters
 - d. TOTAL (a+b+c) _____ Liters
 - e. Total Fuel Used _____ Liters
 - f. Balance in tank after the trip _____ Liters
7. Gear Oil Issued _____ Liters
8. Lube Oil Issued _____ Liters
9. Grease Issued _____ Liters
10. Odometer reading, if any:
 - a. At the beginning of trip _____ Kilometers
 - b. At the end of trip _____ Kilometers
 - c. Actual distance travelled (b-a) _____ Kilometers

11. Remarks: _____

I hereby certify to the correctness of the above statement of record of travel.

Date

Name and Signature of Driver

I hereby certify that I/We used this car on official business as stated above.

Name and Signature of Passenger	Date	Name and Signature of Passenger	Date

To be filled out by the Guard-On-Duty at the main gate:

Departure at the main gate			Arrival at the main gate		
Date	Time	Name and Signature of Guard	Date	Time	Name and Signature of Guard