



UNIVERSITY OF SCIENCE AND TECHNOLOGY OF SOUTHERN PHILIPPINES
C.M. Recto Avenue, Lapasan, Cagayan de Oro City
Tel. Nos. +63 (88) 856 1738; Telefax +63 (88) 856 4696

Date

DRIVER'S TRIP TICKET

To be filled up by authorized representative:

1. Name of Driver: _____
2. Plate No. or Property No. to be used: _____
3. Authorized Passenger/s: _____
4. Place/s to be visited/Inspected: _____
5. Purposed: _____

Gate Guard

Chief of Bureau/Authorized Representative

To be filled up by the driver:

6. Office/Garage Departure Time: _____ () AM () PM
7. Arrival Time at (per no. 4 above) _____ () AM () PM
8. Departure Time at (per no.4 above) _____ () AM () PM
9. Office/Garage Arrival Time: _____ () AM () PM
10. Fuel Issued, Purchased and Consumed:
 - a) Balance in Tank _____ liters
 - b) Issued from Office Stock _____ liters
 - Total: _____ liters
 - c) Deduct used during trip _____ liters
 - d) Balance in Tank after trip _____ liters
 - Total: _____ liters
11. Issued: G.O. _____ liters
12. Speedometer reading after trip: _____
Beginning of Trip: _____
Distance Traveled: _____

REMARKS: _____

I HEREBY CERTIFY to the correctness of the travel:

I HEREBY CERTIFY that will use this car on OFFICIAL BUSINESS ONLY:

Driver

Passenger