## DRIVER'S DAILY LOG

NOTE: All entries must be neatly printed in blocks.

Use blue or black ink only.

		DRIVER'S D	AILY LOG	Use blue	Of black line only	
ORIGINAL - Submit to carrier DUPLICATE - Retain in your possession		,	(F	Print Last Name, First Initial - Ex	. Smith, R)	
Today's Date/Off Duty Begin Date  (Month)  (Day)  (Yea	If multiple off-duty days, ent  (Month) (Day)	er end date here:  (Year)	Jarmo	I certify these entries	are true and correct.	
569	(Tractor Number)		(Safety #)		(Driver's Signature in Full)	
(Total Miles Driving Today)	1 2 9 1 5 (Trailer Number)		(Co-Driver ID)		(Print Co-Driver Name)	
Specialized Transportation Inc.	- 5001 US Hwy. 30W - Fort Wayne, IN	46898	N1 2 3 4	5 6 7 8 9	10 11 T	OTAL HOURS
1: Off Duty 2: Sleeper 3: Driving 4: On Duty (Not Driving)	3 4 5 6 7 8			+++++++++++++++++++++++++++++++++++++++		9.25 14.00 18.50 24.00
(101 5111113)		3 0	कि स्रिप्त	2 2 2		1/4 = 0.25 1/2 = 0.50 3/4 = 0.75
REMARKS:		42 \$ 2	7 4 0	m on		3.4
		N TO A	AN AN	it Laice	47	
LOG USING STANDARD TIME OF HOME TERMINAL  (Home Terminal Address)  DAILY VEHICLE CONDITION REPORT  DAILY VEHICLE CONDITION REPORT  13 Speedometer  14 Speedometer  14 Speedometer						
THIS IS AN END OF THI IF NO DEFECTS ARE FOR THE STATE OF	E DAY INSPECTION (FMCSH 396.1 DUND, PLACE AN (X) IN THE BOX lectors	MARKED "NO DEFECTS  7. Triangles and Fuses  8. Horn (Air and/or Elder)  9. Windshield Wipers		kes	na Reliectors	
				TRANSPORTAT	ION, INC.	
MILES AND FUEL BY STATE - SPECIALIZED TRANSPORTATION, INC.						
Month Day	Year Print Lead Driver's Name	larmon	D		Code	<u> </u>
Tractor/Str. Truck 6 Digit	# PLACE AN [		dum Ve	n & Stage	Agent Code	
177179	(X) IF RENTAL UNIT [	Agent Name STATE/PROVINCE	ROUTES TRAV	ELED MIL	ES/KILOMET	
ODOMETER REAL	DINGS REQUIRED BY "IFTA"			10-		
BEGINNING CITY/STATE	lake	UT LL	I'215 I'	>	pro 1	V

BEGINNING - ODOMETER ENDING - ODOMETER Fulls Attach Fuel Receipts to Miles and Fuel Section.

FUEL RECEIPTS WILL NOT BE ACCEPTED IF THE DATES HAVE BEEN CHANGED