

☐ Specialized Transportation Inc. - 5001 US Hwy. 30W - Fort Wayne, IN 46898

REMARKS:DRIVER'S SIGNATURE _____

ORIGINAL Copy - Mail to Safety Administration every 7 days in attached envelopes

DRIVER'S DAILY LOG

NOTE: All entries must be neatly printed in blocks.
Use blue or black ink only.

Today's Date/Off Duty Begin Date 5-13-15 If multiple off-duty days, enter end date here: - -

(Month) (Day) (Year) (Month) (Day) (Year)

(Print Last Name, First Initial - Ex. Smith, R) HARMON D

I certify these entries are true and correct. [Signature] (Driver's Signature in Full)

343 231783 1499
(Total Miles Driving Today) (Tractor Number) (Safety #)

117747
(Trailer Number) (Co-Driver ID)

 (Print Co-Driver Name)

☐ Specialized Transportation Inc. - 5001 US Hwy. 30W - Fort Wayne, IN 46898

	MID-NIGHT	1	2	3	4	5	6	7	8	9	10	11	NOON	1	2	3	4	5	6	7	8	9	10	11	TOTAL HOURS
1: Off Duty																									<u>13.25</u>
2: Sleeper																									<u>5.25</u>
3: Driving																									<u>5.50</u>
4: On Duty (Not Driving)																									<u>24.00</u>

REMARKS: Challis Schmeyer Reynolds Reynolds Reynolds Victor Rine

1/4 = 0.25
1/2 = 0.50
3/4 = 0.75

B/L NO. 54 LOG USING STANDARD TIME OF HOME TERMINAL Salt Lake UT (Home Terminal Address)

DAILY VEHICLE CONDITION REPORT

THIS IS AN END OF THE DAY INSPECTION (FMCSR 396.11). IF ANY COMPONENTS ARE FOUND TO BE DEFECTIVE, PLACE AN (X) IN THE APPROPRIATE BOX.

IF NO DEFECTS ARE FOUND, PLACE AN (X) IN THE BOX MARKED "NO DEFECTS".

- | | | | | |
|--|---|--|---|--|
| ☐ 1. Air Hoses and Connectors | ☐ 4. Tires | ☐ 7. Triangles and Fuses | ☐ 10. Parking Brake | ☐ 13. Speedometer |
| ☐ 2. Coupling Devices | ☐ 5. Glass and Mirrors | ☐ 8. Horn (Air and/or Electric) | ☐ 11. Steering Mechanism | ☐ 14. Lights and Reflectors |
| ☐ 3. Wheels and Rims | ☐ 6. Fire Extinguisher | ☐ 9. Windshield Wipers | ☐ 12. Service Brakes | ☒ 15. NO DEFECTS |

DRIVER'S SIGNATURE [Signature]

MILES AND FUEL BY STATE - SPECIALIZED TRANSPORTATION, INC.

Month <u>5</u> Day <u>13</u> Year <u>15</u>	Print Lead Driver's Name <u>HARMON D</u>	Lead Hauler Code <u>1499</u>
Tractor/Str. Truck 6 Digit # <u>231783</u>	PLACE AN (X) IF RENTAL UNIT ☐	Agent Name <u>Reynolds Van & Storage</u> Agent Code <u>7445</u>
ODOMETER READINGS REQUIRED BY "IFTA"		MILES/KILOMETERS
BEGINNING CITY/STATE <u>Challis</u>	STATE/PROVINCE <u>ID</u>	ROUTES TRAVELED <u>93 LL (28) (33) LL (33)</u>
BEGINNING - ODOMETER <u>979750</u>		<u>343</u>
ENDING - ODOMETER <u>980093</u>		
ENDING CITY/STATE <u>Rine</u>		

Attach Fuel Receipts to Miles and Fuel Section.

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

343

◀ TOTAL MILES/KILOMETERS DRIVEN TODAY

☐ Specialized Transportation Inc. - 5001 US Hwy. 30W - Fort Wayne, IN 46898



Salt Lake City
(Home Terminal Address)

DRIVER'S SIGNATURE

TOTAL MILES/KILOMETERS
DRIVEN TODAY

DRIVER'S DAILY LOG

NOTE: All entries must be neatly printed in blocks.
Use blue or black ink only.

Today's Date/Off Duty Begin Date
 [5] [16] [15] (Month) (Day) (Year)

If multiple off-duty days, enter end date here:
 [] [] [] [] [] [] (Month) (Day) (Year)

(Print Last Name, First Initial - Ex. Smith, R)
 H a r m o n D [] [] [] [] [] [] [] [] [] [] [] []

I certify these entries are true and correct.
 [Signature] (Driver's Signature in Full)

[530] (Total Miles Driving Today)

[231783] (Tractor Number)

[21166N] (Trailer Number)

[1499] (Safety #)

[] [] [] [] [] [] (Co-Driver ID)

[] [] [] [] [] [] (Print Co-Driver Name)

☐ Specialized Transportation Inc. - 5001 US Hwy. 30W - Fort Wayne, IN 46898

	MID-NIGHT	1	2	3	4	5	6	7	8	9	10	11	NOON	1	2	3	4	5	6	7	8	9	10	11	TOTAL HOURS
1: Off Duty																									14.25
2: Sleeper																									1.75
3: Driving																									7.25
4: On Duty (Not Driving)																									7.5
																									24.00

REMARKS:

1/4 = 0.25
1/2 = 0.50
3/4 = 0.75

B/L NO. 54 LOG USING STANDARD TIME OF HOME TERMINAL Salt Lake UT
 (Home Terminal Address)

DAILY VEHICLE CONDITION REPORT

THIS IS AN END OF THE DAY INSPECTION (FMCSR 396.11). IF ANY COMPONENTS ARE FOUND TO BE DEFECTIVE, PLACE AN (X) IN THE APPROPRIATE BOX.
 IF NO DEFECTS ARE FOUND, PLACE AN (X) IN THE BOX MARKED "NO DEFECTS".

☐ 1. Air Hoses and Connectors	☐ 4. Tires	☐ 7. Triangles and Fuses	☐ 10. Parking Brake	☐ 13. Speedometer
☐ 2. Coupling Devices	☐ 5. Glass and Mirrors	☐ 8. Horn (Air and/or Electric)	☐ 11. Steering Mechanism	☐ 14. Lights and Reflectors
☐ 3. Wheels and Rims	☐ 6. Fire Extinguisher	☐ 9. Windshield Wipers	☐ 12. Service Brakes	☒ 15. NO DEFECTS

DRIVER'S SIGNATURE TR

MILES AND FUEL BY STATE - SPECIALIZED TRANSPORTATION, INC.

Month <u>5</u> Day <u>16</u> Year <u>15</u>	Print Lead Driver's Name <u>Harmon D</u>	Lead Hauler Code <u>1499</u>		
Tractor/Str. Truck 6 Digit # <u>231783</u>	PLACE AN (X) IF RENTAL UNIT ☐	Agent Name <u>Adam Vasek Storge</u> Agent Code <u>7445</u>		
ODOMETER READINGS REQUIRED BY "IFTA"	STATE/PROVINCE	ROUTES TRAVELED	MILES/KILOMETERS	GAL/LITERS FUEL PURCHASED
BEGINNING CITY/STATE <u>Salt Lake</u>	<u>UT</u>	<u>HL 201 I-80</u>	<u>78</u>	
BEGINNING - ODOMETER <u>980391</u>	<u>WY</u>	<u>I-80 I-25</u>	<u>360</u>	<u>96.7</u>
ENDING - ODOMETER <u>980921</u>	<u>CO</u>	<u>I-25 I-270</u>	<u>92</u>	
ENDING CITY/STATE <u>Commerce City</u>				

Attach Fuel Receipts to Miles and Fuel Section.

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

530 TOTAL MILES/KILOMETERS DRIVEN TODAY

☐ Specialized Transportation Inc. - 5001 US Hwy. 30W - Fort Wayne, IN 46898

REMARKS:

B/L NO.

LOG USING STANDARD TIME OF HOME TERMINAL

(Home Terminal Address)

THIS IS AN END OF THE DAY INSPECTION (FMCSR 396.11). IF ANY COMPONENTS ARE FOUND TO BE DEFECTIVE, PLACE AN (X) IN THE APPROPRIATE BOX. IF NO DEFECTS ARE FOUND, PLACE AN (X) IN THE BOX MARKED "NO DEFECTS".

- ☐ 1. Air Hoses and Connectors ☐ 4. Tires
☐ 2. Coupling Devices ☐ 5. Glass and Mirrors
☐ 3. Wheels and Rims ☐ 6. Fire Extinguisher

- MARKED "NO DEFECTS".**
- | | | |
|--|---|--|
| ☐ 7. Triangles and Fuses | ☐ 10. Parking Brake | ☐ 13. Speedometer |
| ☐ 8. Horn (Air and/or Electric) | ☐ 11. Steering Mechanism | ☐ 14. Lights and Reflectors |
| ☐ 9. Windshield Wipers | ☐ 12. Service Brakes | |
- DRIVER'S SIGNATURE** _____

DRIVER'S SIGNATURE

☒ 15. NO DEFECTS

[illegible]

Attach Fuel Receipts to Miles and Fuel Section.

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

TOTAL MILES/KILOMETERS
DRIVEN TODAY

DRIVER'S DAILY LOG

NOTE: All entries must be neatly printed in blocks.
Use blue or black ink only.

Today's Date/Off Duty Begin Date: 5-18-15
(Month) (Day) (Year)

If multiple off-duty days, enter end date here: - -
(Month) (Day) (Year)

(Print Last Name, First Initial - Ex. Smith, R) Harmoon D

I certify these entries are true and correct. [Signature]
(Driver's Signature in Full)

34 (Total Miles Driving Today)
231783 (Tractor Number)
1499 (Safety #)

11X411 (Trailer Number)
 (Co-Driver ID)

 (Print Co-Driver Name)

☐ Specialized Transportation Inc. - 5001 US Hwy. 30W - Fort Wayne, IN 46898

	MID-NIGHT	1	2	3	4	5	6	7	8	9	10	11	NOON	1	2	3	4	5	6	7	8	9	10	11	TOTAL HOURS
1: Off Duty																									<u>23.75</u>
2: Sleeper																									<u>50</u>
3: Driving																									<u>50</u>
4: On Duty (Not Driving)																									<u>25</u>
REMARKS																									<u>2400</u>

Remarks: Salt Lake

1/4 = 0.25
1/2 = 0.50
3/4 = 0.75

B/L NO. 5X LOG USING STANDARD TIME OF HOME TERMINAL Salt Lake UT
(Home Terminal Address)

DAILY VEHICLE CONDITION REPORT

THIS IS AN END OF THE DAY INSPECTION (FMCSR 396.11). IF ANY COMPONENTS ARE FOUND TO BE DEFECTIVE, PLACE AN (X) IN THE APPROPRIATE BOX.
IF NO DEFECTS ARE FOUND, PLACE AN (X) IN THE BOX MARKED "NO DEFECTS".

- | | | | | |
|--|---|--|---|--|
| ☐ 1. Air Hoses and Connectors | ☐ 4. Tires | ☐ 7. Triangles and Fuses | ☐ 10. Parking Brake | ☐ 13. Speedometer |
| ☐ 2. Coupling Devices | ☐ 5. Glass and Mirrors | ☐ 8. Horn (Air and/or Electric) | ☐ 11. Steering Mechanism | ☐ 14. Lights and Reflectors |
| ☐ 3. Wheels and Rims | ☐ 6. Fire Extinguisher | ☐ 9. Windshield Wipers | ☐ 12. Service Brakes | ☒ 15. NO DEFECTS |

DRIVER'S SIGNATURE [Signature]

MILES AND FUEL BY STATE - SPECIALIZED TRANSPORTATION, INC.

Month <u>5</u> Day <u>18</u> Year <u>15</u>	Print Lead Driver's Name <u>Harmoon D</u>	Lead Hauler Code <u>1499</u>		
Tractor/Str. Truck 6 Digit # <u>231783</u>	PLACE AN (X) IF RENTAL UNIT ☐	Agent Name <u>Reuben Van & Stange</u>		
Agent Code <u>7445</u>				
ODOMETER READINGS REQUIRED BY "IFTA"	STATE/PROVINCE	ROUTES TRAVELED	MILES/KILOMETERS	GAL/LITERS FUEL PURCHASED
BEGINNING CITY/STATE <u>Park City</u>	<u>UT</u>	<u>#80 (201) LL</u>	<u>34</u>	
BEGINNING - ODOMETER <u>981414</u>				
ENDING - ODOMETER <u>981448</u>				
ENDING CITY/STATE				

Attach Fuel Receipts to Miles and Fuel Section.

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

34 TOTAL MILES/KILOMETERS DRIVEN TODAY

ORIGINAL Copy - Mail to Safety Administration every 7 days in attached envelopes

1: Off Duty

2: Sleeper

3: Driving

4: On Duty (Not Driving)

REMARKS:

TOTAL HOURS

1	5	0	0
4	5	0	0
2	4	0	0

1/4 = 0.25
1/2 = 0.50
3/4 = 0.75

DRIVER'S SIGNATURE _____

190 ◀ TOTAL MILES/KILOMETERS
DRIVEN TODAY

DRIVER'S DAILY LOG

NOTE: All entries must be neatly printed in blocks.
Use blue or black ink only.

Today's Date/Off Duty Begin Date 5-21-15 (Month) (Day) (Year)

If multiple off-duty days, enter end date here: (Month) (Day) (Year)

(Print Last Name, First Initial - Ex. Smith, R) Harmon D

I certify these entries are true and correct. R (Driver's Signature in Full)

(Total Miles Driving Today) 331 (Tractor Number) 231783 (Safety #) 1499

(Trailer Number) 1177417 (Co-Driver ID) (Print Co-Driver Name)

☐ Specialized Transportation Inc. - 5001 US Hwy. 30W - Fort Wayne, IN 46898

	MID-NIGHT	1	2	3	4	5	6	7	8	9	10	11	NOON	1	2	3	4	5	6	7	8	9	10	11	TOTAL HOURS
1: Off Duty																									17.00
2: Sleeper																									7.25
3: Driving																									5.00
4: On Duty (Not Driving)																									1.25
REMARKS:																									24.00

1/4 = 0.25
1/2 = 0.50
3/4 = 0.75

Ashton
Island park
Ryeby
Salt Lake UT

B/L NO. 5X LOG USING STANDARD TIME OF HOME TERMINAL Salt Lake UT (Home Terminal Address)

DAILY VEHICLE CONDITION REPORT

THIS IS AN END OF THE DAY INSPECTION (FMCSR 396.11). IF ANY COMPONENTS ARE FOUND TO BE DEFECTIVE, PLACE AN (X) IN THE APPROPRIATE BOX.
IF NO DEFECTS ARE FOUND, PLACE AN (X) IN THE BOX MARKED "NO DEFECTS".

- | | | | | |
|--|---|--|---|--|
| ☐ 1. Air Hoses and Connectors | ☐ 4. Tires | ☐ 7. Triangles and Fuses | ☐ 10. Parking Brake | ☐ 13. Speedometer |
| ☐ 2. Coupling Devices | ☐ 5. Glass and Mirrors | ☐ 8. Horn (Air and/or Electric) | ☐ 11. Steering Mechanism | ☐ 14. Lights and Reflectors |
| ☐ 3. Wheels and Rims | ☐ 6. Fire Extinguisher | ☐ 9. Windshield Wipers | ☐ 12. Service Brakes | ☒ 15. NO DEFECTS |

DRIVER'S SIGNATURE R

MILES AND FUEL BY STATE - SPECIALIZED TRANSPORTATION, INC.

Month <u>5</u> Day <u>21</u> Year <u>15</u>	Print Lead Driver's Name <u>Harmon D</u>	Lead Hauler Code <u>1499</u>		
Tractor/Str. Truck 6 Digit # <u>231783</u>	PLACE AN (X) IF RENTAL UNIT ☐	Agent Name <u>Redman Van & Storage</u>		
Agent Code <u>7445</u>				
ODOMETER READINGS REQUIRED BY "IFTA"	STATE/PROVINCE	ROUTES TRAVELED	MILES/KILOMETERS	GAL/LITERS FUEL PURCHASED
BEGINNING CITY/STATE <u>Ashton</u>	<u>ID</u>	<u>20 Ln 20 Ln 20 I 15</u>	<u>234</u>	
BEGINNING - ODOMETER <u>981937</u>	<u>UT</u>	<u>I 15 I 215 Ln</u>	<u>97</u>	
ENDING - ODOMETER <u>982268</u>				
ENDING CITY/STATE <u>Salt Lake</u>				

Attach Fuel Receipts to Miles and Fuel Section.

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

331 TOTAL MILES/KILOMETERS DRIVEN TODAY