DRIVER'S DAILY LOG

(One Calendar Day - 24 Hours)

CARRIER NAME &

North American Van Lines, Inc. 5001 U.S. HIGHWAY 30 WEST ADDRESS FT.WAYNE, IN 46818

MOVING SERVICES	
Month Day Year Total Miles / Kilometers Driven To	
010515 280	Tuleve Hommes
Tractor / Str. Truck 6 Digit NAVL # Driver's 5 Digit Code	Driver's name (Please print)
1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	h///
Trailer Number (if none, leave blank) Co-Driver's Code (If none, leave blank)	Driver's signature in full
Trailer Number (If none, leave blank) Co-Driver's Code (If none, leave blank)	
111424	Print Co-Driver's Name (If none, leave blank)
LICE TIM	E STANDARD AT AGENCY
	11 NOON 1 2 3 4 5 6 7 8 9 10 11 TOTAL HOURS
MID- NIGHT 1 2 3 4 5 6 7 8 9 10	
1: Off Duty	
S. Clause	
2: Sleeper	5_
3: Driving	
4: On Duty (Not Driving)	
MID- 4 0 0 4 5 6 7 8 9 10	11 NOON 1 2 3 4 5 6 7 8 9 10 11
NIGHT 1 2 3 4 3 0 1 0 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
REMARKS:	Must Total 24 Hours
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	John Sing St.
X	Jacob City State
Reg. Number / Agent Code	Agent Name Home Terminal - Agent City, State
Load Identification	of horizonal Workstalls of City of
112574 04810 Redman	Van & Stokage West Valley CHULUT
DAILY VEH	ICLE CONDITION REPORT
THE ANY COMPONE	ENTS ARE FOUND TO BE DEFECTIVE, PLACE AN (X) IN THE APPROPRIATE BOX.
THIS IS AN END OF THE DAY INSPECTION (FMCSH 390.11). IF ANY COMPON	ENTS ARE TOOKS TO BE SELECTIVE,
IF NO DEFECTS ARE FOUND, PLACE AN (X) IN THE BOX MARKED THO DEFI	ENTS ARE FOUND TO BE DEFECTIVE, PLACE AN (X) IN THE APPROPRIATE BOX. CCTS".
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