DUPLICATE - Retain in your possession for 8 days

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: 09-17-14 (Month Day Year)

If multiple off-duty days, enter end date here: 09-24-14 (Month Day Year)

(Print Last Name, First Initial - Ex. Smith, R): AMBREY T

(Total Miles Driving Today)

(Tractor Number)

SF (Safety #)

I certify these entries are true and correct.

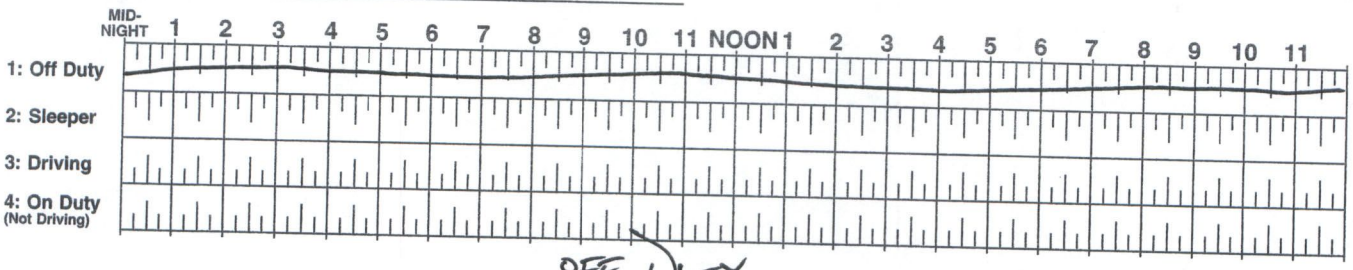
SF (Driver's Signature in Full)

(Trailer Number)

(Co-Driver ID)

(Print Co-Driver Name)

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



TOTAL HOURS: 24.00 / 24.00

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

REMARKS:

OFF DUTY
SLEPT
9.17.14 - 9.24.14

B/L NO. _____ LOG USING STANDARD TIME OF HOME TERMINAL _____
(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
☐ 2. Coupling Devices
☐ 3. Wheels and Rims
☐ 4. Tires
☐ 5. Glass and Mirrors
☐ 6. Fire Extinguisher
☐ 7. Triangles and Fuses
☐ 8. Horn (Air and/or Electric)
☐ 9. Windshield Wipers
☐ 10. Parking Brake
☐ 11. Steering Mechanism
☐ 12. Service Brakes
☐ 13. Speedometer
☐ 14. Lights and Reflectors
☐ 15. NO DEFECTS

DRIVER'S SIGNATURE _____

MILES AND FUEL BY STATE - SPECIALIZED TRANSPORTATION, INC.

Month Day Year: __ __ - __ __ - __ __

Print Lead Driver's Name

Lead Hauler Code

Tractor/Str. Truck 6 Digit #

PLACE AN (X) IF RENTAL UNIT ☐

Agent Name

Agent Code

ODOMETER READINGS REQUIRED BY "IFTA"	STATE/PROVINCE	ROUTES TRAVELED	MILES/KILOMETERS	GAL/LITERS FUEL PURCHASED
BEGINNING CITY/STATE		OFF DUTY		
BEGINNING - ODOMETER		SLEPT		
ENDING - ODOMETER				
ENDING CITY/STATE				

LEAD DRIVER ONLY

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

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