ORIGINAL - Submit to carrier 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 If multiple off-duty days, enter end date here: First Initial - Ex. Smith, R) 0 O 0 (Day) (Month) (Month) (Day) (Year) are true and correct (Total Miles Driving Today) (Tractor Number) (Trailer Number) (Co-Driver ID) Specialized Transportation Inc. - 5001 US Hwy. 30W - Fort Wayne, IN 46898 (Print Co-Driver Name) 10 11 NOON 1 11 **TOTAL HOURS** Timin 1: Off Duty 00 2: Sleeper 3: Driving 4: On Duty **REMARKS:** 1/2 = 0.503/4 = 0.752.6.15-3.8.15 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". ☐ 10. Parking Brake ☐ 13. Speedometer ☐ 1. Air Hoses and Connectors ☐ 4. Tires ☐ 7. Triangles and Fuses ☐ 11. Steering Mechanism ☐ 14. Lights and Reflectors ☐ 2. Coupling Devices □ 15. NO DEFECTS ☐ 5. Glass and Mirrors □ 8. Horn (Air and/or Electric) □ 12. Service Brakes ☐ 3. Wheels and Rims ☐ 6. Fire Extinguisher ☐ 9. Windshield Wipers DRIVER'S SIGNATURE MILES AND FUEL BY STATE - SPECIALIZED TRANSPORTATION, INC. Month Day Print Lead Lead Hauler Driver's Name Code Tractor/Str. Truck 6 Digit # PLACE AN Agent (X) IF RENTAL UNIT Agent ODOMETER READINGS REQUIRED BY "IFTA" STATE/PROVINCE ROUTES TRAVELED MILES/KILOMETERS GAL/LITERS FUEL PURCHASED BEGINNING CITY/STATE BEGINNING - ODOMETER ENDING - ODOMETER ENDING CITY/STATE

TOTAL MILES/KILOMETERS
DRIVEN TODAY

Attach Fuel Receipts to Miles and Fuel Section.

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