the possession for 8 days	DRIVER'S DAILY LOG	NOTE: All entries must be neatly printed in blocks. Use blue or black ink only.
	days, enter end date here: (Pri	nt Last Name, First Initial - Ex. Smith, R)
742 231	660 P738	I certify these entries are true and correct.
(Total Miles Driving Today) (Tractor Number	(Safety #)	(Driver's Signature in Full)
(Trailer Number	(Co-Driver ID)	(Print Co-Driver Name)
Specialized Transportation Inc 5001 US Hwy. 30W - Fort Way	yne, IN 46898 8 9 10 11 NOON 1 2 3 4 5	6 7 8 9 10 11 TOTAL HOURS
1: Off Duty 2: Sleeper 3: Driving		
REMARKS: Pevol:	CC:	1/4 = 0.25 1/2 = 0.50 3/4 = 0.75
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THIS IS AN END OF THE DAY INSPECTION (FMCSR 39 IF NO DEFECTS ARE FOUND, PLACE AN (X) IN THE BOTH IN TH	6.11). IF ANY COMPONENTS ARE FOUND TO BE DEFECT	IVE, PLACE AN (X) IN THE APPROPRIATE BOX. 13. Speedometer 14. Lights and Reflectors 15. NO DEFECTS
		NCDODIATION INC
Month Day Year	EL BY STATE - SPECIALIZED TRA	Lead Hauler P778
Tractor/Str. Truck 6 Digit # PI ACE AN	Agent Pades Jan Van Qt	race Agent 7 4 4 5
231600 (X) IF RENTAL UNIT	STATE/PROVINCE ROUTES TRAVELED	MILES/KILOMETERS GAL/LITERS FUEL PURCHASED
Fort Pierce. FL.	F 1 104,1-95, us-17, SR-4	82,1a 210.0
BEGINNING - ODOMETER _ 65229	(CF) miles	
ENDING - ODOMETER 6597 ENDING CITY/STATE - 1	by star	3
Releigh. NC.		
V	0,00	
	1	1

NOTE: All entries must be neatly printed in blocks.

4	to carrier in in your possession for 8 days	DRIVER'S DAILY LOG	Use blue or black ink only.
	64-16	ys, enter end date here: (Prin	Last Name, First Initial - Ex. Smith, R) I certify these entries are true and correct.
5	Driving Today) (Tractor Number)	960 P738 (Safety #)	(Driver's Signature in Full)
	[2 2 2 2 (Trailer Number)	2 H L (Co-Driver ID)	. (Print Co-Driver Name)
Speciali	zed Transportation Inc 5001 US Hwy. 30W - Fort Wayn	8 9 10 11 NOON1 2 3 4 5	6 7 8 9 10 11 TOTAL HOURS
1: Off Du 2: Sleep 3: Drivin 4: On Du (Not Drivin	er	2X. Living Colone Terminal Sec.	
	CAA.		1/4 = 0.25 1/2 = 0.50
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	OX/	ik. Ju	11/-
D# NO	LOG USING S	STANDARD TIME OF HOME TERMINAL	(Home Terminal Address)
B/L NO.	110 04 40		(Home Terminal Address)
	DISCOULED OF THE DAY INCRECTION (EMCSP 3050	DAILY VEHICLE CONDITION REPORT	IVE, PLACE AN (X) IN THE APPROPRIATE BOX.
IF N	O DEFECTS ARE FOUND, PLACE AN (X) IN THE BU	i.11). IF ANY COMPONENTS ARE FOUND TO BE DEFECT IX MARKED "NO DEFECTS".	TO THE PARTY OF TH
F N	O DEFECTS ARE FOUND, PLACE AN (X) IN THE BC Air Hoses and Connectors	i.11). IF ANY COMPONENTS ARE FOUND TO BE DEFECT IX MARKED "NO DEFECTS".	m 14. Lights and Reflectors 15. NO DEFECTS
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IF N	O DEFECTS ARE FOUND, PLACE AN (X) IN THE BO. Air Hoses and Connectors	Agent Redman Van Sto	NSPORTATION, INC. Lead Hauler P738
F N	O DEFECTS ARE FOUND, PLACE AN (X) IN THE BO. Air Hoses and Connectors	Agent Redman .Van. Sto	NSPORTATION, INC. Lead Hauler P738 Code Agent Code 7445
F N	O DEFECTS ARE FOUND, PLACE AN (X) IN THE BO. Air Hoses and Connectors	Agent Redman Van Sto	NSPORTATION, INC. Lead Hauler P738 Code Agent Code 7445
F N 1 2 3 3 4 4 4 4 4 4 4 4	MILES AND FUE Onth Day Onth Day Octoor/Str. Truck 6 Digit # Print Lead Driver's Name Actor/Str. Truck 6 Digit # Compliance Company of the Company of	Agent Redman Van Sto	NSPORTATION, INC. Lead Hauler P738 Code Agent Code 7445
F N 1 2 3 3 3 4 4 4 4 4 4 4	MILES AND FUE Onth Day Octoor/Str. Truck 6 Digit # Print Lead Driver's Name Actor/Str. Truck 6 Digit # Compling City/State DING - ODOMETER ON HER AND STATE ON HER AN	Agent Redman Van Sto	NSPORTATION, INC. Lead Hauler P738 Code Agent Code 7445
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FUEL RECEIPTS WILL NOT BE ACCEPTED IF THE DATES HAVE BEEN CHANGED

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

DRIVER'S DAILY LOG

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

16-26-16 D-	ays, enter end date neve.	st Initial - Ex. Smith, R)
(Month) (Day) (Year) (Month) (Tractor Number)	Gafety #)	(Driver's Signature in Full)
(Trailer Number)	2HL (Co-Driver ID)	(Print Co-Driver Name)
Specialized Transportation Inc 5001 US Hwy. 30W - Fort Wayr		O O 10 11 TOTAL HOURS
1: Off Duty 2: Sleeper 3: Driving 4: On Duty (Not Driving)	8 9 10 11 NOON1 2 3 4 5 6 7	8 9 10 11 TOTAL HOURS 1/4 = 0.25
REMARKS:	·	
REMARKS: REMARKS: Diving Proving Pro	A print	3/4 = 0.73
PH. Jer WY. Die	STANDARD TIME OF HOME TERMINAL Sk. U.F.	
B/L NO. FM 5523 LOG USING	STANDARD TIME OF HOME TERMINAL	(Home Terminal Address)
	DAILY VEHICLE CONDITION REPORT 5.11). IF ANY COMPONENTS ARE FOUND TO BE DEFECTIVE, PLACE AND MARKED "NO DEFECTS". □ 10. Parking Brake □ 13. S	peedometer ighte and Reflectors 15. NO DEFECTS
THIS IS AN END OF THE DAY INSPECTION (FMCSR 396 IF NO DEFECTS ARE FOUND, PLACE AN (X) IN THE BO 1. Air Hoses and Connectors 4. Tires 2. Coupling Devices 5. Glass and Mirrors	DAILY VEHICLE CONDITION REPORT 5.11). IF ANY COMPONENTS ARE FOUND TO BE DEFECTIVE, PLACE AND MARKED "NO DEFECTS". 10. Parking Brake 13. Steering Mechanism 14. Light of the lectric 12. Service Brakes 14. Light of the lectric 12. Service Brakes 14. Light of the lectric 14. Light of the lectric 15. Service Brakes 15. Service	
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NOTE: All entries must be neatly printed in blocks. Use blue or black ink only.

S Date/Off Duty Begin Date If multiple off-duty days, enter end date here: (Print Last Name, First Initial - Ex. Smith, R) (Print Last Name, First Initial - Ex. Smith, R) (Month) (Day) (Year) (Month) (Day) (Year)	F
Atth) (Day) (Year) (Month) (Day) (Year) Control of the sentries are true and correct.	
(Trailer Number) (Co-Driver ID) (Print Co-Driver Name)	
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 1: Off Duty 2: Sleeper 3: Driving 4: On Duty (Not Driving)	URS
REMARKS: 1/1/3/1/3/	4 = 0.25 2 = 0.50 4 = 0.75
REMARKS: Soplin: Mo. Sc. Lt. B/L NO. EC 90 75 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 4. Tires 7. Triangles and Fuses 9. Windshield Wipers 9. Windshield Wipers DRIVER'S SIGNATURE	rs
MILES AND FUEL BY STATE - SPECIALIZED TRANSPORTATION, INC.	
O6-14-15 Print Lead Driver's Name Faatoing Vag. Lead Hauler P738	
Tractor/Str. Truck 6 Digit # PLACE AN (X) IF RENTAL UNIT Agent Name Redman Van Storage Agent Code 744	5
ODOMETER READINGS REQUIRED BY "IFTA" STATE/PROVINCE ROUTES TRAVELED MILES/KILOMETERS GAL/LITERS FUEL PURCH	ASED
Dollas. TX	
BEGINNING - ODOMETER 67965	_

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

s Date/Off Duty Begin Date Find the properties of the propertie	Vaal
(Month) (Day) (Year) (Month) (Day) (Year) 7 2 5	(Driver's Signature in Full)
(Co-Driver ID)	(Print Co-Driver Name)
1: Off Duty 2: Sleeper 3: Driving 4: On Duty (Not Driving)	9 10 11 TOTAL HOURS 7 5 0 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
REMARKS:	1/4 = 0.25 1/2 = 0.50 3/4 = 0.75
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THE OF HOME TERMINAL	
DAILY VEHICLE CONDITION REPORT	ne Terminal Address)
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Attach Fuel Receipts to Miles and Fuel Section.

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

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

/s Date/Off Duty Begin Da		s, enter end date here: ay) (Year)		(Print Last	Name, First Initial -		149 F
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	(Trailer Number)	2 H L	(Co-Drive	r ID)		(Print Co-Drive	r Name)
	5001 US Hwy. 30W - Fort Wayne		, NOON 4 0	2 4 5 (5 7 8	9 10 11	TOTAL HOURS
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06-27	Print Lead Driver's Name	Falatoi	١/.	/		Lead Hauler Code	P738
Tractor/Str. Truck & Digit	PLACE AN (X) IF RENTAL UNIT	Agent 5	Redman	Van. S	torage	Agent Code	7445
ODOMETER READIN	NGS REQUIRED BY "IFTA"	STATE/PROVINCE	ROUTES	TRAVELED	MILE	S/KILOMETERS	GAL/LITERS FUEL PURCHASED
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Attach Fuel Receipts to Miles and Fuel Section.

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

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

6 - carrier	ER'S DAILY LUG Use	blue or black ink only.
DRIV Ate/Off Duty Begin Date (Month) (Day) (Year) (Tractor Number) (Trailer Number) Specialized Transportation Inc 5001 US Hwy. 30W - Fort Wayne, IN 46898	(Print Last Name, First Initial Control of the Cont	(Driver's Signature in Full) (Print Co-Driver Name)
	11 NOON1 2 3 4 5 6 7 8	9 10 11 TOTAL HOURS
1: Off Duty 2: Sleeper 3: Driving 4: On Duty (Not Driving)		
REMARKS:	W.	3/4 = 0.75
LOG USING STANDARD TIM	ME OF HOME TERMINAL S.C. (190	me Terminal Address)
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if to carrier tain in your possession for 8 days Date/Off Duty Begin Date	(Co-Driver ID)	I certify these entries are true and correct. (Driver's Signature in Full) (Print Co-Driver Name)
	9 10 11 NOON1 2 3 4 5	6 7 8 9 10 11 TOTAL HOURS
1: Off Duty 2: Sleeper 3: Driving 4: On Duty (Not Driving)		1/4 = 0.25
REMARKS:	A	1/2 = 0.50 3/4 = 0.75
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FUEL RECEIPTS WILL NOT BE ACCEPTED IF THE DATES HAVE BEEN CHANGED

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

TOTAL MILES/KILOMETERS
DRIVEN TODAY

7-25-16		nt Last Name, First Initial - Ex. Smith, R)
(Month) (Day) (Year) (Month)	(Day) (Year) (Safety #)	Cortify these entries are true and correct (Driver's Signature in Full)
(Total Miles Driving Today) (Tractor Numbe	2HL	(Print Co-Driver Name)
Specialized Transportation Inc 5001 US Hwy. 30W - Fort Wa	ayne, IN 46898	(int do blive Haire)
1: Off Duty 2: Sleeper 3: Driving 4: On Duty (Not Driving)	8 9 10 11 NOON1 2 3 4 5	5 6 7 8 9 10 11 TOTAL HOURS 1
REMARKS:	0.	1/4 = 0.25 1/2 = 0.50
B/L NO. LOG USING	STANDARD TIME OF HOME TERMINAL S/C	3/4 = 0.75 . U.f. (Home Terminal Address)
	DAILY VEHICLE CONDITION REPORT	
THIS IS AN END OF THE DAY INSPECTION (FMCSR 38 IF NO DEFECTS ARE FOUND, PLACE AN (X) IN THE B 1. Air Hoses and Connectors 4. Tires 2. Coupling Devices 5. Glass and Mirrors 3. Wheels and Rims 6. Fire Extinguisher	96.11). IF ANY COMPONENTS ARE FOUND TO BE DEFECT	n 13. Speedometer 15. NO DEFECTS
-		
MILES AND FU	EL BY STATE - SPECIALIZED TRA	NSPORTATION, INC.
67-25-16 Print Lead Driver's Name	Falatoina Vala.	Lead Hauler _ £738
Tractor/Str. Truck 6 Digit # PLACE AN (X) IF RENTAL UNIT	Agent Redman Van.	Torage Agent 7445
ODOMETER READINGS REQUIRED BY "IFTA"	STATE/PROVINCE ROUTES TRAVELED	MILES/KILOMETERS GAL/LITERS FUEL PURCHASED
BEGINNING CITY STATE CT.	Pa	240.0
BEGINNING - GOOMETER 77538		
ENDING - ODOMETER 77951		3
Winchester. Va.		

Attach Fuel Receipts to Miles and Fuel Section.

mit to carrier detain in your possession for 8 days	DRIVER'S DAILY LOG	Use	blue or black in	k only.
s Date/Off Duty Begin Date If multiple off-duty days, enter (Month) (Day)	end date here: (Year)	(Print Last Name, First Initi		1997
428 23166	PZ3 (Safety #)	8 I certify these	(Driver's Signatu	2
(Tractor Number) (Tractor Number) (Tractor Number) (Tractor Number)	(Co-Driver ID)		(Print Co-Drive	er Name)
Specialized Transportation Inc 5001 US Hwy. 30W - Fort Wayne, IN 468	98		0 40 41	TOTAL HOURS
1: Off Duty 2: Sleeper 3: Driving 4: On Duty (Not Driving)	10 11 NOON1 2 3 4	1 5 6 7 8	9 10 11	
REMARKS:	\\\.\\\.\\\.\\\\\\\\\\\\\\\\\\\\\\\\\\			1/4 = 0.25 1/2 = 0.50 3/4 = 0.75
\ das.	W. M. W	·./		
REMARKS:	Beaver. W. C. U	Y		
01/203		71 , 11		
XIII	847.	la.Ut.		
B/L NO. TF 75 94 LOG USING STAND	ARD TIME OF HOME TERMINAL	(Hor	ne Terminal Address)	
	DAILY VEHICLE CONDITION REF	PORT	IN THE APPROPRI	ATE BOX.
THIS IS AN END OF THE DAY INSPECTION (FMCSR 396.11). IF IF NO DEFECTS ARE FOUND, PLACE AN (X) IN THE BOX MARI	Triangles and Fuses	lechanism 14. Lights	ometer and Reflectors	15. NO DEFECTS
1. All Hoses and Connectors 5. Glass and Mirrors 7.8	Harry (Air and/or Electric) Windshield Wipers DRIVER'S SIG	akes	coina	
-			TION INC	
MILES AND FUEL BY	STATE - SPECIALIZED	TRANSPORTA	Lead Hauler	D-70
Wildital	itoina Vaa.	-01	Code	P738
Tractor/Str. Truck 6 Digit # PLACE AN (X) IF RENTAL UNIT	Agent Redman Van	. Storage	Agent Code	7445
ODOMETER READINGS REQUIRED BY "IFTA" STATE/PE	ROVINCE ROUTES TRAVE	ELED M	ILES/KILOMETERS	GAL/LITERS FUEL PURCHASED
Las Vegas . NV.				
BEGINNING - ODOME (ER) 81006			_/	
ENDING - ODOMETER 81434		_ ()		
ENDING OTY/STATE		_		
SIC.UI.				
				/
		(Ct)	vilec	_
		()	alsta	e
Attach Fuel Receipts to Miles and Fuel Section.			7 2100	TOTAL MILES/KILOMETER DRIVEN TODA
FUEL RECEIPTS WILL NOT BE ACCEPTED IF THE I	DATES HAVE BEEN CHANGED	_		3.11.21.100

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