Not a Service Failure - Just an FYI

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: 07-30-14 (Month-Day-Year)

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

(Print Last Name, First Initial - Ex. Smith, R): STOOKEY C

(Total Miles Driving Today): 721

(Tractor Number): 231025

(Safety #): 874F

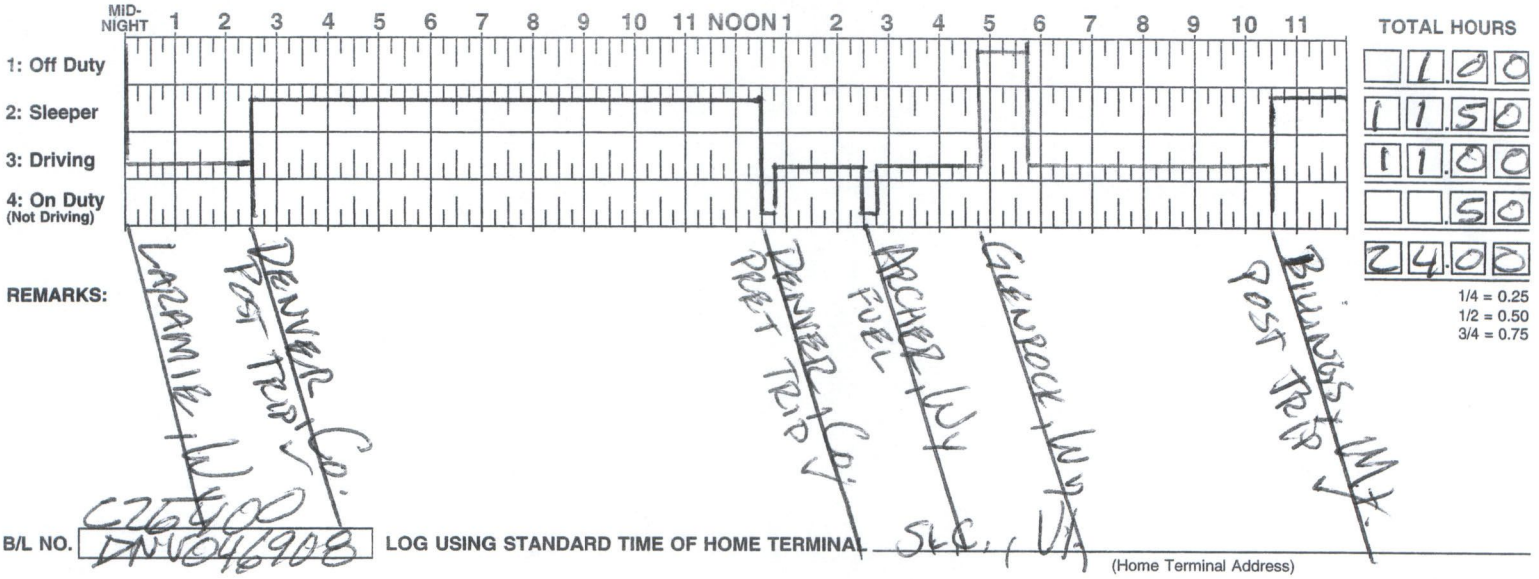
I certify these entries are true and correct. (Driver's Signature in Full)

(Trailer Number): 608712

(Co-Driver ID)

(Print Co-Driver Name): NONE

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



TOTAL HOURS: 10.0, 11.5, 11.0, .5, 24.0

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

REMARKS:

B/L NO. C26400 DNV046908

LOG USING STANDARD TIME OF HOME TERMINAL SLC, 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	☒ 15. NO DEFECTS
☐ 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		

DRIVER'S SIGNATURE

MILES AND FUEL BY STATE - SPECIALIZED TRANSPORTATION, INC.

Month-Day-Year: 07-30-14

Print Lead Driver's Name: CARY B STOOKEY

Lead Hauler Code: 874F

Tractor/Str. Truck 6 Digit #:

PLACE AN (X) IF RENTAL UNIT: ☐

Agent Name: Redman

Agent Code: 2445

ODOMETER READINGS REQUIRED BY "IFTA"	STATE/PROVINCE	ROUTES TRAVELED	MILES/KILOMETERS	GAL/LITERS FUEL PURCHASED
BEGINNING CITY/STATE: LARAMIE	WY	US287	10	
BEGINNING - ODOMETER: 889359	CO	US287, Co.14, I-25, I-270	132	
ENDING - ODOMETER: 890070	~~NE~~	I-270, I-25	93	
ENDING CITY/STATE: BILLINGS	WY	I-25, I80, I-90	382	
	MT	I-90	104	

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

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: 07-14-14 (Month-Day-Year)

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

(Print Last Name, First Initial - Ex. Smith, R): STOOKEY C

(Total Miles Driving Today): 000

(Tractor Number):

(Safety #): 8746

I certify these entries are true and correct:

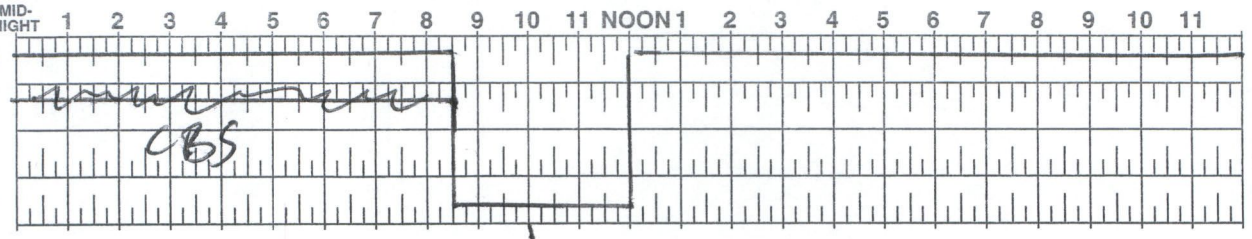
(Driver's Signature in Full):

(Trailer Number):

(Co-Driver ID):

(Print Co-Driver Name): NONE

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



TOTAL HOURS
20.50
00.00
0.00
3.50
24.00

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

REMARKS: SALT LAKE CITY ORIENTATION

B/L NO. N/A

LOG USING STANDARD TIME OF HOME TERMINAL SLC, 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 ☐ 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

DO NOT SIGN YOUR INSP. ON DAYS YOU don't drive

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: N/A

Agent Code: _ _ _ _ _ _ _ _

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				

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