

carrier
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.

Date/Off Duty Begin Date: 05-11-15 (Month) (Day) (Year)

If multiple off-duty days, enter end date here: 05-11-15 (Month) (Day) (Year)

(Print Last Name, First Initial - Ex. Smith, R) Jacobson, S

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

(Total Miles Driving Today) 753

(Tractor Number) 00000000

(Safety #) 000000

(Trailer Number) 00000000

(Co-Driver ID) 000000

(Print Co-Driver Name) _____

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

	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	TOTAL HOURS
1: Off Duty																									09.50
2: Sleeper																									00.00
3: Driving																									10.50
4: On Duty (Not Driving)																									04.50

REMARKS: Billings MT Bozeman W. Yellowstone Gallatin Gateway Bozeman Manoth Billings States

B/L NO. 0511-15 LOG USING STANDARD TIME OF HOME TERMINAL Billings MT (Home Terminal Address)

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

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 |
| ☐ 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 | ☒ 15. NO DEFECTS |

DRIVER'S SIGNATURE: Seth Jacobson

MILES AND FUEL BY STATE - SPECIALIZED TRANSPORTATION, INC.

Month <u>05</u> Day <u>11</u> Year <u>15</u>	Print Lead Driver's Name <u>Seth Jacobson</u>	Lead Hauler Code _____
Tractor/Str. Truck 6 Digit # <u>390351</u>	PLACE AN (X) IF RENTAL UNIT ☐	Agent Name <u>Redman Land Storage</u>
Agent Code <u>SE-7645</u>		
ODOMETER READINGS REQUIRED BY "IFTA"		
BEGINNING CITY/STATE <u>Billings</u>	STATE/PROVINCE <u>MT</u>	ROUTES TRAVELED <u>I-90</u>
BEGINNING - ODOMETER <u>193294</u>		<u>14185191</u>
ENDING - ODOMETER <u>194047</u>		<u>89</u>
ENDING CITY/STATE <u>Billings</u>	<u>MT</u>	<u>Locally</u>

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

TOTAL MILES/KILOMETERS DRIVEN TODAY

753 # of miles driven