

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

REMARKS:
MEDFORD OR
Pilot

B/L NO. MT 000500

LOG USING STANDARD TIME OF HOME TERMINAL 2571W 2590W S. L. - 4 UT. 84104
(Home Terminal Address)

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

[illegible]

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

Today's Date/Off Duty Begin Date

If multiple off-duty days, enter end date here:

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

If multiple off-duty days, enter end date here:

		-			-		
(Month)			(Day)			(Year)	

280
(Total Miles Driving Today)

4 0 7 1 6 3
 (Tractor Number)

2517
(Safety #)

I certify these entries are true and correct.

(Driver's Signature in Full)

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

(Co-Driver ID)

(Print Co-Driver Name)

8 hr rule

1: Off Duty

2: Sleeper

3: Driving

4: On Duty (Not Driving)

REMARKS:

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	5	5	0
	7	5	0
	1		
2	4		

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

REMARKS:

B/L NO.

LOG USING STANDARD TIME OF HOME TERMINAL 2571W 2590S S.L.C. UT. 8404
(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
☐ 2. Coupling Devices ☐ 5. Glass and Mirrors ☐ 8. Horn (Air and/or Electric) ☐ 11. Steering Mechanism
☐ 3. Wheels and Rims ☐ 6. Fire Extinguisher ☐ 9. Windshield Wipers ☐ 12. Service Brakes
- ☒ 13. Speedometer
☐ 14. Lights and Reflectors ☒ 15. NO DEFECTS

DRIVER'S SIGNATURE

MILES AND FUEL BY STATE - SPECIALIZED TRANSPORTATION, INC.	
Year	

[illegible]

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

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

Today's Date/Off Duty Begin Date 04-10-15 (Month) (Day) (Year)

If multiple off-duty days, enter end date here: 04-13-15 (Month) (Day) (Year)

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

Total Miles Driving Today

(Tractor Number)

(Safety #)

(Trailer Number)

(Co-Driver ID)

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

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

(Print Co-Driver Name)

(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)																									

REMARKS: *off through 04-13-15*

cc 1/1 when 2 air slot

TOTAL HOURS

24

24

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

REMARKS:

off duty where? city, state

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 ☐ 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

MILES AND FUEL BY STATE - SPECIALIZED TRANSPORTATION, INC.	
Year	

[illegible]

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

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

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

RAMBA S

I certify these entries are true and correct.



(Driver's Signature in Full)

(Co-Driver ID)

(Print Co-Driver Name)

REMARKS:

BASE ID
P.T.1

MERIDIAN ID
UNLOAD AND
LOAD

PENDING OR
POST TRIP INSP.

LOG USING STANDARD TIME OF HOME TERMINAL

2571 W 25708 S. L. Ave, 84104
(Home Terminal Address)

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

☐ 13. Speedometer ☒ 15. NO DEFECTS
☐ 14. Lights and Reflectors

[illegible]

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

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
04-16-15
(Month) (Day) (Year)

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

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

(Total Miles Driving Today)
498

(Tractor Number)
407163

(Safety #)
2513

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

(Trailer Number)
124149

(Co-Driver ID)

(Print Co-Driver Name)

☐ Specialized Transportation Inc. - 5001 US Hwy. 30W - Fort Wayne, IN 46896

	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																									10.00
2: Sleeper																									10.25
3: Driving																									3.75
4: On Duty (Not Driving)																									0.75

REMARKS:

8 hr rule

PENDLETON OR
P.I.

PENDLETON WA
SWITCHING TRUCKS
WITH RENTAL
P.I. 236866
853679

STANFIELD OR
POST TRIP INSP.

24 1/4 = 0.25
1/2 = 0.50
3/4 = 0.75

B/L NO. 299919 LOG USING STANDARD TIME OF HOME TERMINAL 2571W 2590SE S.L.C. UT 84104
(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 |
| ☐ 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

MILES AND FUEL BY STATE - SPECIALIZED TRANSPORTATION, INC.

Month	Day	Year	Print Lead Driver's Name	Lead Hauler Code		
04	16	15	SABATA L. RAMBA			
Tractor/Str. Truck 6 Digit # 407163			Agent Name REDMAN VAN & STG	Agent Code 7445		
PLACE AN (X) IF RENTAL UNIT ☐						
ODOMETER READINGS REQUIRED BY "IFTA"			STATE/PROVINCE	ROUTES TRAVELED	MILES/KILOMETERS	GAL./LITERS FUEL PURCHASED
BEGINNING CITY/STATE PENDLETON/OR			OR	1-84W, I-82	28	
BEGINNING - ODOMETER 206699			OR	1-82W	10	
ENDING - ODOMETER 853940			WA	1-82W, I-90	110	
ENDING CITY/STATE STANFIELD/OR			WA	1-90W	85	
			WA	HWY 18W	28	
			WA	HWY 18E	28	
			WA	1-90E	85	
			WA	1-82E	110	
			OR	1-82E	10	
			OR	1-84E	5	
			TOTAL MILES/KILOMETERS DRIVEN TODAY 1109			

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 DRIVEN

you do not need to fill out a new line for each road just seperated by state

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
04-19-15
(Month) (Day) (Year)

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

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

Total Miles Driving Today
541

(Tractor Number)
236866

(Safety #)
259J

(Trailer Number)
111711

(Co-Driver ID)
- - - - -

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

(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																									15.00
2: Sleeper																									0.00
3: Driving																									7.75
4: On Duty (Not Driving)																									1.25
REMARKS:																									24.00

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

SPILT LAKE CITY UT
BREAK LARAMIE WY

7

B/L NO. 41275200 LOG USING STANDARD TIME OF HOME TERMINAL 25716 259050 S.L.C. UT 84104
(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 |
| ☐ 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

[Signature]

MILES AND FUEL BY STATE - SPECIALIZED TRANSPORTATION, INC.

Month	Day	Year	Print Lead Driver's Name	Lead Hauler Code
04	19	15	SABATA L. RAMBA	
Tractor/Str. Truck 6 Digit # 236866			PLACE AN (X) IF RENTAL UNIT ☐	Agent Name REDMAN VAN & STOR
ODOMETER READINGS REQUIRED BY "IFTA"			Agent Code 7445	4273
BEGINNING CITY/STATE	STATE/PROVINCE	ROUTES TRAVELED	MILES/KILOMETERS	GAL/LITERS FUEL PURCHASED
DENVER/CO	CO	1-25N	91	
BEGINNING - ODOMETER 855087	WY	1-25N	10	122.
ENDING - ODOMETER 855634	WY	1-80W	359	
ENDING CITY/STATE S.L.C/UT	UT	1-80W	81	
<i>turn in receipts</i>				
			841	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