



Form 0315

Driver's Daily Log

(One Calendar Day - 24 Hours)

Will be Scanned
Please Print Clearly Within the Boxes

Month Day Year
5 - 19 - 05

Total Miles Driving Today
687

CARRIER NAME & ADDRESS
Sample Bros. Trucking
1234 Small St. Middleton, PA 10980

Tractor Number
43432

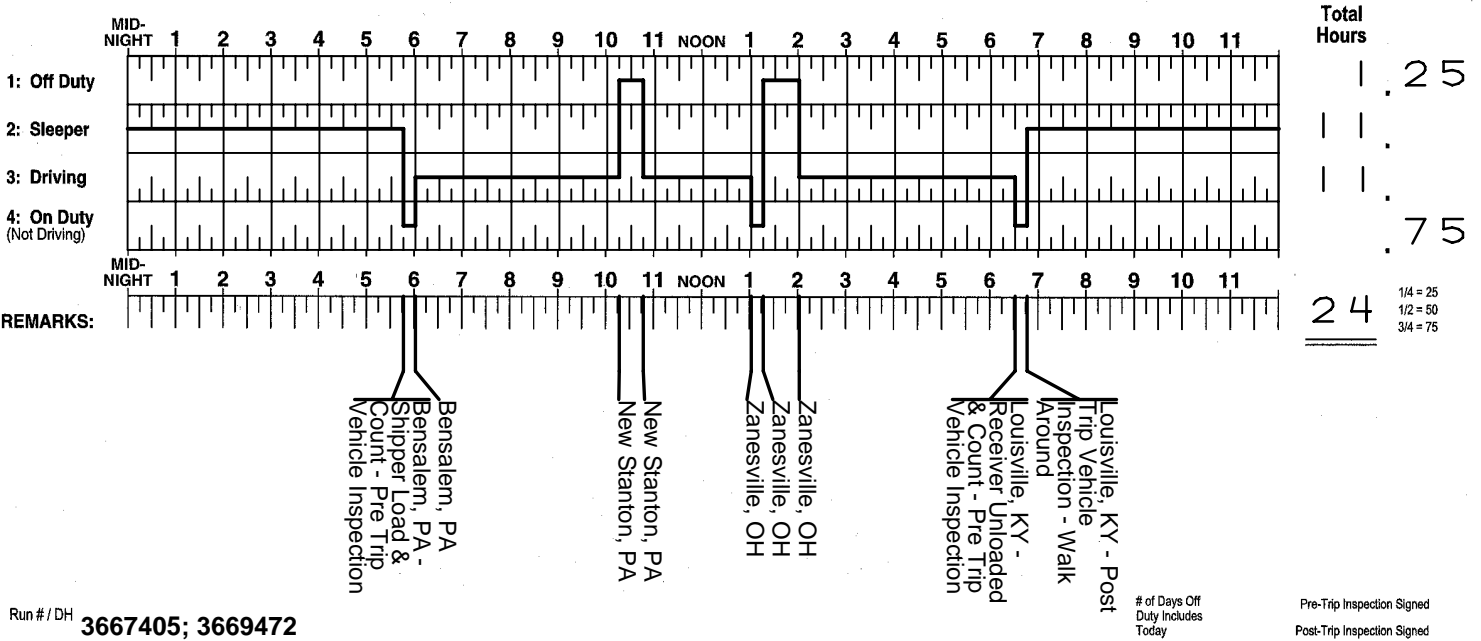
Driver's ID / Code
12345

I certify these entries are true and correct
Driver's Signature in Full
I. M. Sample Driver

Trailer Number
20232

Co-Driver's ID / Code
54321

Co-Driver's Name
I. M. Sample Driver
Cousin Sample Driver



USE TIME STANDARD AT HOME TERMINAL

Original Copy Submit to Carrier
Driver's Copy Retain in Possession for 8 Days

DRIVER'S VEHICLE INSPECTION REPORT

AS REQUIRED BY THE D.O.T. FEDERAL MOTOR CARRIER SAFETY REGULATIONS, I SUBMIT THE FOLLOWING:

DATE: 05/19/05 TRACTOR/TRUCK NO.: 43432 TRAILER(S) NO.(S): 20232

I DETECT NO DEFECT OR DEFICIENCY IN THIS MOTOR VEHICLE AS WOULD BE LIKELY TO AFFECT THE SAFETY OF ITS OPERATION OR RESULT IN ITS MECHANICAL BREAKDOWN

I DETECT THE FOLLOWING DEFECTS OR DEFICIENCIES IN THIS MOTOR VEHICLE AS WOULD BE LIKELY TO AFFECT THE SAFETY OF ITS OPERATION OR RESULT IN ITS MECHANICAL BREAKDOWN

INDICATE WHETHER DEFECTS ARE ON TRACTOR/TRUCK OR TRAILER - DESCRIBE DEFECT IN DETAIL, USE BACK SIDE IF NECESSARY.

I. M. Sample Driver

DRIVER'S SIGNATURE:

ABOVE DEFECTS CORRECTED
 ABOVE DEFECTS NEED NOT BE CORRECTED FOR SAFE OPERATION OF VEHICLE

MECHANIC'S SIGNATURE:

I. M. Sample Driver DATE: 05/19/05

DRIVER'S SIGNATURE:

DATE: