Form 0801

DRIVER'S DAILY LOG
(24 HOURS)

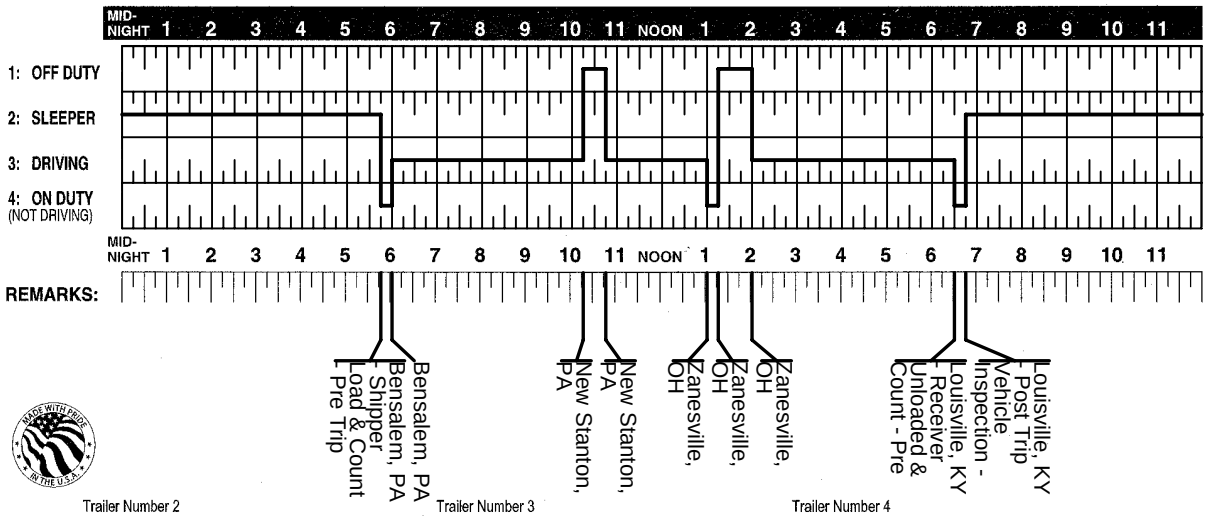
Will be Scanned
Please Print Clearly Within the Boxes

Month	Day	Year	Total Miles Driving Today
5	19	05	687

CARRIER NAME & ADDRESS: **Sample Bros. Trucking**
1234 Small St. Middleton, PA 10980
Main Office

Tractor Number: 43432
Driver's ID / Code: 12345
Trailer Number: 20232
Co-Driver's ID / Code: 54321

I certify these entries are true and correct — Driver's Signature in Full: *I. M. Sample Driver*
Home Terminal: I. M. Sample Driver
Co-Driver's Name: **Cousin Sample Driver**



TOTAL HOURS	
1	.25
11	.
11	.
	.75
24	

1/4 = 25
1/2 = 50
3/4 = 75

Trailer Number 2 — Trailer Number 3 — Trailer Number 4

Returned to normal work location at end of day

Shipper / Commodity: **3667405; 3669472**

# of Days Off Duty Includes Today

Pre-Trip Inspection Signed

Post-Trip Inspection Signed

RECAP
Complete at end of workday.

1.	3.25
2.	9.75
3.	11.25
4.	2.25
5.	6.50
6.	6.75
7.	7.00
Total	46.75
Subtract From 70 Hours	23.25
Total of Available Hours	

If you took 34 consecutive hours off duty, you have 70 hours available again.

Original File at home terminal
Duplicate Driver retains in his/her possession for eight days

USE TIME STANDARD AT HOME TERMINAL
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Sample Bros. Trucking - Driver's Daily Vehicle Condition POST TRIP REPORT

DATE: 05/19/05 TIME: _____ **TRACTOR NO.** 43432 **TRAILER NO.** 20232

SERVICE BRAKES _____ TIRES _____ COUPLING DEVICES _____
PARKING BRAKE _____ HORN _____ WHEELS/RIMS _____
STEERING _____ WIPERS _____ EMERGENCY EQUIPMENT _____
LIGHT/REFLECTORS _____ MIRRORS _____ OTHER _____
REMARKS _____

☑ **VEHICLE CONDITION SATISFACTORY** Driver's Signature *I. M. Sample Driver*

I CERTIFY THAT ABOVE DEFECTS WERE REPAIRED OR CORRECTED AS NECESSARY.

REPAIRMAN (OR DRIVER) _____ REVIEWING DRIVER _____

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