

DRIVER DAILY LOG
FICHE JOURNALIÈRE DU CONDUCTEUR

05 19 05
MONTH DAY YEAR
MOIS JOUR ANNEE

SHIFT START TIME
POSTE DE TRAVAIL DEBUTE

189725
ENDING ODOMETER
ODOMETRE AU FIN

43432
TRUCK/TRACTOR: LIC. PLATE
CAMION/TRACTEUR: PLAQUE D'IMM

UNIT #
NUMÉRO

986546-MO
TRAILER(S): LIC. PLATE
REMORQUE(S): PLAQUE D'IMM

UNIT #
NUMÉRO

20232

UNIT #
NUMÉRO

UNIT #
NUMÉRO

189038

STARTING ODOMETER
ODOMETRE AU DÉBUT

TRANSX LTD.

CARRIER(S) TRANSPORTEUR(S) ROUTIER(S)

687

MILES (Km) DRIVEN TODAY
MILLES (Km) CONDUITS AUJOURD'HUI

687

TRUCK MILES (Km) TODAY
MILLES (Km) DE CAMION AUJOURD'HUI

2595 INKSTER BLVD. - WINNIPEG, MB R3C 2E6

MAIN/PRINCIPAL OFFICE ADDRESS ADRESSE DE L'ÉTABLISSEMENT PRINCIPAL

2595 INKSTER BLVD. - WINNIPEG, MB R3C 2E6

HOME TERMINAL ADDRESS TERMINUS D'ATTACHE

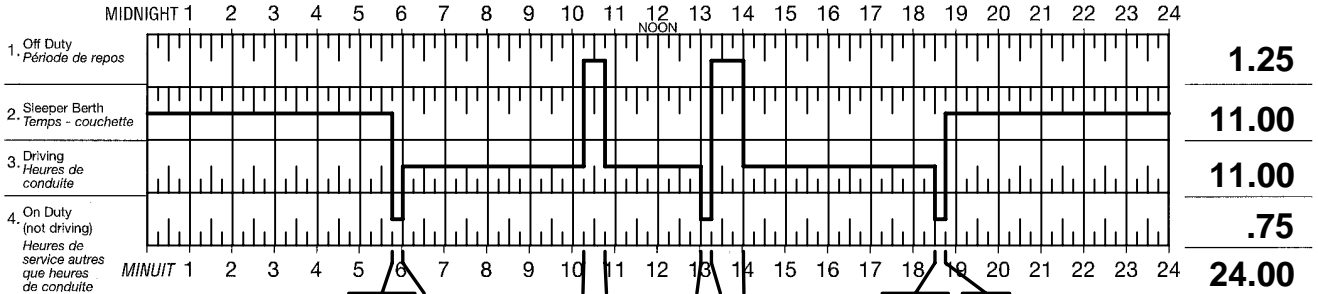
DUTY STATUS - ACTIVITE

Use Local Time Standard at Home Terminal

GRID - GRILLE

Utiliser l'heure locale au terminus d'attache

Total Hours
Total des heures



REMARKS
OBSERVATIONS

Bensalem, PA
Shipper Load & Count
Pre Trip Vehicle
Inspection

New Stanton, PA
New Stanton, PA

Zanesville, OH
Zanesville, OH

Louisville, KY - Post
Trip Vehicle Inspection
Walk Around
Louisville, KY -
Receiver Unloaded &
Count - Pre Trip
Vehicle Inspection

I. M. Sample Driver

I. M. Sample Driver

DRIVER'S SIGNATURE
SIGNATURE DE CONDUCTEUR

CERTIFIED TRUE & CORRECT
ATTESTÉE VÉRIDIQUE EXACTE

Cousin Sample Driver

CO-DRIVER'S NAME/AUTRE CONDUCTEUR(S)

0050559

0001340649;

ROHCRO: TYSROB Chemicals; Tyson

SHIPPING DOC. NO. OR
DOC. D'EXPÉDITION OU

SHIPPER
EXPÉDITEUR

AND
ET

COMMODITY
BIEN

DRIVER'S DAILY VEHICLE INSPECTION REPORT

DATE **05/19/05**

TIME

PRE-TRIP

POST-TRIP

VEHICLE MAKE

TRUCK #

43432

TRAILER(S) #

20232

CHECK ANY DEFECTIVE ITEM & EXPLAIN ANY DEFECTS IN 'REMARKS'

- | | | |
|---|--|--|
| <input type="checkbox"/> ENGINE COMPARTMENT (Belts, Hoses, Fluid Levels, Etc.) | <input type="checkbox"/> AIRBRAKE ADJUSTMENT AND CONNECTIONS | <input type="checkbox"/> WHEELS, RIMS, FASTENERS |
| <input type="checkbox"/> INSIDE CAB (Warning Devices, Gauges, Defrost, Heaters, Etc.) | <input type="checkbox"/> DRIVER SEATBELT AND SEAT SECURITY | <input type="checkbox"/> EMERGENCY EQUIPMENT (Fire ext., Flares, Etc.) |
| <input type="checkbox"/> STEERING MECHANISM | <input type="checkbox"/> HYDRAULIC BRAKE FLUID | <input type="checkbox"/> LOAD SECURITY, COVERING |
| <input type="checkbox"/> WINDSHIELD WIPERS/WASHERS | <input type="checkbox"/> GENERAL CONDITION OF UNIT(S), MUD FLAPS, DAMAGE, ETC. | <input type="checkbox"/> FUEL SYSTEM |
| <input type="checkbox"/> WINDSHIELD, WINDOWS | <input type="checkbox"/> HORNS | <input type="checkbox"/> EXHAUST SYSTEM |
| <input type="checkbox"/> REAR VISION MIRRORS | <input type="checkbox"/> AIR AND LIGHT LINES | <input type="checkbox"/> SUSPENSION SYSTEM |
| <input type="checkbox"/> ALL LIGHTS AND REFLECTORS | <input type="checkbox"/> COUPLING DEVICES, SLIDER PINS, FIFTH WHEEL | <input type="checkbox"/> LANDING GEAR |
| <input type="checkbox"/> PARKING AND SERVICE BRAKES | <input type="checkbox"/> TIRES | <input type="checkbox"/> OTHER |

REMARKS:

VEHICLE CONDITION OKAY
(This must be checked if no defects found)

DEFECTS DO NOT NEED TO BE CORRECTED
FOR SAFE OPERATION

I. M. Sample Driver

REPORTING/INSPECTING DRIVER'S SIGNATURE

DEFECTS CORRECTED

MECHANIC/REPAIRMAN SIGNATURE

REVIEWING DRIVER'S SIGNATURE