

**WILL BE SCANNED
PLEASE PRINT
CLEARLY IN BOXES**



LOGCJHT

DRIVER'S DAILY LOG (One calendar day - 24 hours)

4-24-08
DATE (MONTH/DAY/YEAR)

612
DRIVER MILES

612
TEAM MILES

67655
TRACTOR NUMBER

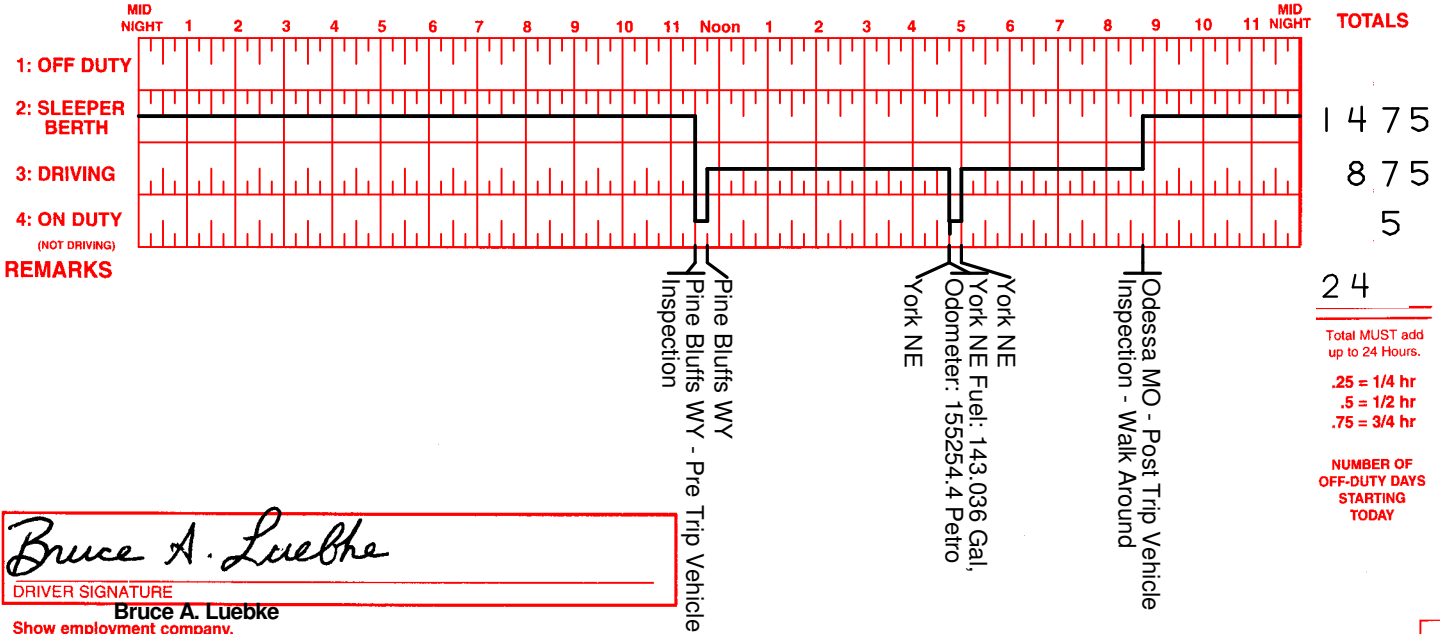
203596
DRIVER CODE

JOHN CHRISTNER TRUCKING, INC

COMPANY
19007 West Highway 33 Sapulpa, OK 74067-1900
MAIN ADDRESS

DRIVER NAME
5000585
TRIP #

CO-DRIVER NAME
11191
TRAILER # - SHOW ALL UNITS



Bruce A. Luebke
DRIVER SIGNATURE
Bruce A. Luebke
Show employment company.
Use time standard of home terminal.

Hours Worked Last 7 Days
 1. **12.00**
 2. **8.25**
 3. **8.50**
 4. **11.50**
 5. **7.50**
 6. **3.00**
 7. **10.00**
 Yesterday
 Total Hours
60.75
 70 Hours Less
 Total Hours Equals Hours Available Today
9.25
 Hours Worked Today
9.25
 If Hours Worked Today Exceeds Hours Available, You Are In Violation. Your Reason Must Appear in "Remarks"
 34 Hours Restart

CHECK IF ANY DEFECTIVE ITEM AND GIVE DETAILS UNDER DEFECTS - IF NO DEFECTS CHECK BOX AT RIGHT

POST TRIP	ITEM	POST TRIP	ITEM
<input type="checkbox"/>	SERVICE BRAKE INCLUDING TRAILER BRAKE CONNECTION	<input type="checkbox"/>	HORN - WINDSHIELD WIPERS - SEAT BELT
<input type="checkbox"/>	PARKING (HAND) BRAKE	<input type="checkbox"/>	REAR VISION MIRRORS - OTHER GLASS
<input type="checkbox"/>	STEERING MECHANISM	<input type="checkbox"/>	COUPLING DEVICES
<input type="checkbox"/>	LIGHTING DEVICES AND REFLECTORS	<input type="checkbox"/>	TRAILER AND LOAD
<input type="checkbox"/>	TIRES - WHEELS AND RIMS	<input type="checkbox"/>	EMERGENCY EQUIPMENT

I CERTIFY I HAVE REVIEWED THE PREVIOUS D.V.I.R.

DRIVER'S DAILY VEHICLE INSPECTION REPORT

(COMPLETE AT END OF EACH WORK DAY)
 I HAVE EXAMINED THE VEHICLES INDICATED ABOVE INCLUDING THE PARTS AND ACCESSORIES NOTED TO THE LEFT **Vehicle condition satisfactory**
 DEFECTS: _____

SIGNATURE OF DRIVER REVIEWING REPORT _____ SIGNATURE OF MECHANIC MAKING REPAIRS _____ SIGNATURE OF DRIVER MAKING REPORT *Bruce A. Luebke*