



Month Day Year Total Miles Driving Today
6 - 28 - 08 677

CARRIER NAME & ADDRESS
**PRIME INC. (800) 321-4552
BOX 4208, SPRINGFIELD, MO 65808**

Tractor Number
67655
Trailer Number
26382

Driver's ID / Code
203596
Co-Driver's ID / Code

I certify these entries are true and correct

Driver's Signature in Full
Bruce A. Luebke
Co-Driver's Name

	MID-NIGHT												NOON												MID-NIGHT												TOTAL HOURS
	1	2	3	4	5	6	7	8	9	10	11	1	2	3	4	5	6	7	8	9	10	11	1	2	3	4	5	6	7	8	9	10	11				
1: OFF DUTY	[Graphical representation of duty status]																																				1.25
2: SLEEPER	[Graphical representation of duty status]																																				11.75
3: DRIVING	[Graphical representation of duty status]																																				10.25
4: ON DUTY (NOT DRIVING)	[Graphical representation of duty status]																																				.75
REMARKS:	[Graphical representation of duty status]																																				24
	Fiona TX 175870.0MI TX 5108767 67655 XLFRI LOADED Fiona TX - Shipper Load & Count - Pre Trip Vehicle Inspection 67655 26382 Amarillo TX Amarillo TX 436 Odometer: 175945.7 Pilot # Amarillo TX Amarillo TX Fuel: 32.766 Gal, Oklahoma City OK Oklahoma City OK Oklahoma City OK Hazen AR - Post Trip Vehicle Inspection - Walk Around																																				

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

Returned to normal work location at end of day

Shipper / Commodity 5108767

of Days Off Duty Includes Today

Pre-Trip Inspection Signed
Post-Trip Inspection Signed

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

USE TIME STANDARD AT HOME TERMINAL

DRIVER'S VEHICLE INSPECTION REPORT

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

DATE: 06/28/08 TRACTOR/TRUCK NO.: 67655 TRAILER(S) NO.(S): 26382

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.

DRIVER'S SIGNATURE: *Bruce A. Luebke*

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

MECHANIC'S SIGNATURE: _____ DRIVER'S SIGNATURE: _____ DATE: _____