



DRIVER'S DAILY LOG

(One Calendar Day - 24 Hours)

ORIGINAL - File each day at home terminal
DUPLICATE - Driver retains in his possession for one month

Form 0349002

MONTH DAY YEAR TOTAL MILEAGE TODAY X - DENOTES

VEHICLE NUMBERS

TRACTOR NO. TRAILER NO.

TOTAL MILES DRIVING TODAY

16 HR. RULE

I certify these entries are true and correct:

Bruce A. Luebke

Bruce A. Luebke

PRIME INC. (800) 321-4552

(DRIVER'S SIGNATURE IN FULL)

(NAME OF CARRIER OR CARRIERS)

BOX 4208, SPRINGFIELD, MO 65808

(MAIN OFFICE ADDRESS)

(NAME OF CO-DRIVER)

	MID-NIGHT	1	2	3	4	5	6	7	8	9	10	11	NOON	1	2	3	4	5	6	7	8	9	10	11	TOTAL HOURS	
1: OFF DUTY																									<input type="text" value="1"/>	
2: SLEEPER BERTH																										<input type="text" value="1"/>
3: DRIVING																										<input type="text" value="1"/>
4: ON DUTY (NOT DRIVING)																										<input type="text" value="1"/>

REMARKS

ADDITIONAL BOL/PRO#

5408856;
5413759

Trip Vehicle Inspection
 Green River UT - Pre
 West Wind Truck Stop
 Odometer: 242043.8
 Fuel: 5.437 Gal.
 Green River UT - Reefer
 Green River UT
 Springfield UT
 Receiver Unloaded and
 Counted
 Springfield UT
 Springfield UT -
 Load & Count
 Springfield UT - Shipper
 Evanson WY
 Evanson WY Fuel:
 127.075 Gal, Odometer:
 242307.4
 Pilot
 Odometer: 242307.4
 Evanson WY
 Evanson WY - Reefer
 Fuel: 28.447 Gal,
 Odometer: 242307.4

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

ADDITIONAL TRACTOR/TRAILER#s
67655;
27837; 28368

BOL/PRO#

FACILITY NO.

DRIVER'S I.D.#

DRIVER'S VEHICLE INSPECTION REPORT

AS REQUIRED BY THE D.O.T. FEDERAL MOTOR CARRIER SAFETY REGULATIONS

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PRIME INC. (800) 321-4552

BOX 4208, SPRINGFIELD, MO 65808

DATE: 01/12/2009 TIME: _____ A.M. _____ P.M.

TRACTOR(S)/TRUCK(S) NO. 67655 CHECK ANY DEFECTIVE ITEM AND GIVE DETAILS UNDER "REMARKS"

TRUCK(S) NO. 67655		ODOMETER READING	
<input type="checkbox"/> Air Compressor	<input type="checkbox"/> Defroster/Heater	<input type="checkbox"/> Lights	<input type="checkbox"/> Rear End
<input type="checkbox"/> Air Lines	<input type="checkbox"/> Drive Line	<input type="checkbox"/> Head - Stop	<input type="checkbox"/> Reflectors
<input type="checkbox"/> Battery	<input type="checkbox"/> Engine	<input type="checkbox"/> Tail - Dash	<input type="checkbox"/> Safety Equipment
<input type="checkbox"/> Body	<input type="checkbox"/> Exhaust	<input type="checkbox"/> Turn Indicators	<input type="checkbox"/> Fire Extinguisher
<input type="checkbox"/> Brake Accessories	<input type="checkbox"/> Fifth Wheel	<input type="checkbox"/> Mirrors	<input type="checkbox"/> Reflective Triangles
<input type="checkbox"/> Brakes, Parking	<input type="checkbox"/> Frame and Assembly	<input type="checkbox"/> Muffler	<input type="checkbox"/> Flags - Flares - Fuses
<input type="checkbox"/> Brakes, Service	<input type="checkbox"/> Front Axle	<input type="checkbox"/> Oil Pressure	<input type="checkbox"/> Spare Bulbs & Fuses
<input type="checkbox"/> Clutch	<input type="checkbox"/> Fuel Tanks	<input type="checkbox"/> Radiator	<input type="checkbox"/> Spare Seal Beam
<input type="checkbox"/> Coupling Devices	<input type="checkbox"/> Horn		<input type="checkbox"/> Suspension System
			<input type="checkbox"/> Starter
			<input type="checkbox"/> Steering
			<input type="checkbox"/> Tachograph
			<input type="checkbox"/> Tires
			<input type="checkbox"/> Tire Chains
			<input type="checkbox"/> Transmission
			<input type="checkbox"/> Wheels and Rims
			<input type="checkbox"/> Windows
			<input type="checkbox"/> Windshield Wipers
			<input type="checkbox"/> Other

TRAILER(S) NO.(S) 27837; 28368

<input type="checkbox"/> Brake Connections	<input type="checkbox"/> Coupling (King) Pin	<input type="checkbox"/> Landing Gear	<input type="checkbox"/> Roof	<input type="checkbox"/> Tarpaulin	<input type="checkbox"/> Wheels and Rims
<input type="checkbox"/> Brakes	<input type="checkbox"/> Doors	<input type="checkbox"/> Lights - All	<input type="checkbox"/> Suspension System	<input type="checkbox"/> Tires	<input type="checkbox"/> Other
<input type="checkbox"/> Coupling Devices	<input type="checkbox"/> Hitch				

Remarks: _____

CONDITION OF THE ABOVE VEHICLE IS SATISFACTORY

DRIVER'S SIGNATURE: *Bruce A. Luebke*

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

MECHANIC'S SIGNATURE: _____ DATE: _____

DRIVER'S SIGNATURE: _____ DATE: _____