



# DRIVER'S DAILY LOG

(24 HOURS)

(Month) / (Day) / (Year)  
Original - File at home terminal  
Duplicate - Driver retains in his/her possession for eight days

**MILLER EXPEDITED FREIGHT**  
**5777 DECATUR BLVD. STE. # 300**  
**INDIANAPOLIS, INDIANA 46241**

**RECAP**  
Complete at end of workday.  
On-duty hours today. (Total lines 3 & 4)  
**70 Hour/ 8 Day Drivers**

Total Miles Driving Today  Total Mileage Today

Truck/Tractor and Trailer Numbers or License Plate(s) / State (show each unit)

Home Terminal Address  
I certify these entries are true and correct:

**A.**  
Total hours on duty last 7 days, including today.

**B.**  
Total hours available tomorrow.  
70 hr. minus A.\*

**C.**  
Total hours on duty last 8 days, including today.

**60 Hour/ 7 Day Drivers**

**A.**  
Total hours on duty last 6 days, including today.

**B.**  
Total hours available tomorrow.  
60 hr. minus A.\*

**C.**  
Total hours on duty last 7 days, including today.

\*If you meet the 34-hour restart requirements in 49CFR.3, you have 6070 hours available again.



	MID-NIGHT											NOON											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. OFF DUTY																							
2. SLEEPER BERTH																							
3. DRIVING																							
4. ON DUTY (NOT DRIVING)																							

REMARKS

	MID-NIGHT											NOON										
	1	2	3	4	5	6	7	8	9	10	11	1	2	3	4	5	6	7	8	9	10	11

SHIPPING DOCUMENTS:

B/L or Manifest No. or

Shipper & Commodity

Enter name of place you reported and where released from work and when and where each change of duty occurred.

From: \_\_\_\_\_ To: \_\_\_\_\_  
USE TIME STANDARD AT HOME TERMINAL

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## IFTA/IRP TRIP REPORT

Company Name \_\_\_\_\_ Truck Unit # \_\_\_\_\_

Origin \_\_\_\_\_ Destination \_\_\_\_\_

DATE	STATE OR PROVINCE	HIGHWAYS USED	ODOMETER READING BEGINNING	STATE EXIT	TOLL MILEAGE	ENDING	TOTAL MILES

STAPLE ALL ORIGINAL FUEL & TOLL RECEIPTS TO THIS PORTION IFTA/IRP trip report retain 4 years

## SHIPMENTS ON TRUCK

ORDER NO.	WEIGHT	FROM	TO

## SHIPMENTS UNLOADED TODAY

ORDER NO.	COLLECT OR BILLED	AMOUNT COLLECTED	MAILED PAPERS FROM

## DRIVER'S VEHICLE INSPECTION REPORT

DRIVER USE / IF SATISFACTORY MECHANIC USE / WHEN CORRECTED AND USE X IF NOT SATISFACTORY YOUR INITIALS

TRACTOR/TRUCK NO.:	D		M	
D - DRIVER'S REPORT M - MECHANIC'S REPORT				
Brake Lines to Trailer				
Electric Lines to Trailer				
Drive Line				
Coupling Devices				
Tires, Wheels, Rims				
Suspension System				
Body				
Glass				
Exhaust				
Frame & Assembly				
Fuel System				
Cooling System				
Engine				
Leaks				
Head Lights				
Tail Lights				
Stop & Turn Lights				
Clearance & Marker Lights				
Reflectors				
Air Pressure Warning Device				
Oil Pressure				
Ammeter				
Horn				
Windshield Wipers				
Parking Brakes				
Clutch				
Transmission				
Rear Vision Mirror				
Steering				
Service Brakes				
Speedometer				
Other Items				
EMERGENCY EQUIPMENT				
Reflective Triangles				
Fire Extinguisher				
Flags, Fusees, Fuses, Spare Bulbs				
Tire Chains				

TRAILER(S) NO.(S):	D		M	
D - DRIVER'S REPORT M - MECHANIC'S REPORT				
Brakes				
Brake Connections				
Coupling Devices				
Coupling (King) Pin				
Doors				
Hitch				
Landing Gear				
Lights - All				
Roof				
Suspension System				
Tarpaulin				
Tires				
Wheels - Rims				
Other				

I MADE INSPECTION AS REQUIRED ON LISTED ITEMS

DRIVER:  
ODOMETER END OF DAY \_\_\_\_\_  
ODOMETER START OF DAY \_\_\_\_\_  
TOTAL MILES DRIVEN TODAY \_\_\_\_\_  
NEXT LUBRICATION DUE AT \_\_\_\_\_ MILEAGE

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

MECHANIC'S SIGNATURE: \_\_\_\_\_

DRIVER'S SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_