

(Date) (Year) (Total mileage today) **545**  
 (Total miles driving today)  
 Driver or Carrier **MPL Trucking Inc.**  
 Main Office Address **PO Box 700 Kimberlin PA**

I certify these entries are true and correct. (Vehicle numbers - (Show each trip))  
 Driver's signature in full **[Signature]**  
 Name **None**  
 Name of co-driver **None**  
 Home Terminal Address

Driving  
 Line 3  
 Total Hrs. On Duty  
 Last 8 Days(3+4)  
 Total Hrs. On Duty  
 Last 7 Days(3+4)  
 Eligible Hours Tomorrow  
 60 Minus (3) or 70 Minus (2)  
 Code For Violation  
 Or  
 On Duty

NO. 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
DRIVER	[Bar chart showing activity]																						1 1/2	
ELIGIBLE	[Bar chart showing activity]																						11 1/4	
REST	[Bar chart showing activity]																						10	
TOTAL	[Bar chart showing activity]																						21 1/4	

(Starting Point or Place) TO: (Destination or last arrival point or place)  
 USE TIME STANDARD AT HOME TERMINAL  
 Remarks: **Missed last night**  
**11:30 AM to 7:30 AM**  
**Rest in U.S. Car**  
**with driver**  
**11:30 AM**

Form prescribed by the DEPT. OF TRANSPORTATION FEDERAL HIGHWAY ADMINISTRATION REV. 67  
**DRIVER'S DAILY LOG**  
 (One calendar day-24 hours)  
 Date **12 9 91**  
 (Total mileage today) **523**  
 (Total miles driving today) **523**  
 Driver or Carrier **MPL Trucking Inc.**  
 Main Office Address **PO Box 700 Kimberlin PA**

Form approved Except Bureau No. 04-7256 ORIGINAL-File each day at home terminal DUPLICATE-Driver retains in his possession for one month TRIPlicate-Driver's record by carrier  
 I certify these entries are true and correct. (Vehicle numbers - (Show each trip))  
 Driver's signature in full **[Signature]**  
 Name **None**  
 Name of co-driver **None**  
 Home Terminal Address

Log No.  
 Total Hrs. Driving  
 Line 3  
 Total Hrs. On Duty  
 Last 8 Days(3+4)  
 Total Hrs. On Duty  
 Last 7 Days(3+4)  
 Eligible Hours Tomorrow  
 60 Minus (3) or 70 Minus (2)  
 Code For Violation  
 Or  
 On Duty

NO. 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
DRIVER	[Bar chart showing activity]																						1	
ELIGIBLE	[Bar chart showing activity]																						10	
REST	[Bar chart showing activity]																						10 1/2	
TOTAL	[Bar chart showing activity]																						21 1/2	

(Starting Point or Place) TO: (Destination or last arrival point or place)  
 USE TIME STANDARD AT HOME TERMINAL  
 Remarks: **Missed last night**  
**11:30 AM to 7:30 AM**  
**Rest in U.S. Car**  
**with driver**  
**11:30 AM**

(Month) 7 (Day) 21 (Year) 1991  
 (Total mileage today) 504  
 (Total miles driving today) 504  
 Name of Carrier or Owner: MPC Truck  
 Name of Driver: Robert Kimberlin

I certify these entries are true and correct. Vehicle number: SAVE  
 Driver's signature in full: [Signature]  
 (Type of co-driver) SAVE  
 Home Office Address: \_\_\_\_\_ Home Terminal Address: \_\_\_\_\_

Total Hrs Driving \_\_\_\_\_  
 Line 3 \_\_\_\_\_  
 Total Hrs On Duty \_\_\_\_\_  
 Last 8 Days(3+) \_\_\_\_\_  
 Total Hrs On Duty \_\_\_\_\_  
 Last 7 Days(3+) \_\_\_\_\_  
 Eight Hours Tomorrow \_\_\_\_\_  
 60 Minus ( ) \_\_\_\_\_  
 or \_\_\_\_\_  
 70 Minus ( ) \_\_\_\_\_  
 Code For Violation \_\_\_\_\_  
 On Duty \_\_\_\_\_

NO. 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 Miles
OFF DUTY	[Grid with vertical lines]																							6 1/2
DRIVING	[Grid with vertical lines]																							5
ON DUTY (not driving)	[Grid with vertical lines]																							10 1/2
ON DUTY (not driving)	[Grid with vertical lines]																							2

NO. 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 Miles
DRIVING	[Grid with vertical lines]																							20

(Starting Point or Place) \_\_\_\_\_ TO: \_\_\_\_\_ (Destination or turn around point or place)  
 USE TIME STANDARD AT HOME TERMINAL

Form 30- Provided by the  
 DEPT. OF TRANSPORTATION  
 FEDERAL HIGHWAY ADMINISTRATION REV. 47

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

Form approved. Subject Driver No. 04-12300  
 ORIGINAL-File each day at home terminal  
 DUPLICATE-Driver retains in his possession for one month  
 TRIPlicate-Driver's record for carrier

(Month) 6 (Day) 7 (Year) 1991  
 (Total mileage today) 504  
 (Total miles driving today) 504  
 Name of Carrier or Owner: MPC Truck  
 Name of Driver: Robert Kimberlin

I certify these entries are true and correct. Vehicle number: SAVE  
 Driver's signature in full: [Signature]  
 (Type of co-driver) SAVE  
 Home Office Address: \_\_\_\_\_ Home Terminal Address: \_\_\_\_\_

Log No. \_\_\_\_\_  
 Total Hrs. Driving \_\_\_\_\_  
 Line 3 \_\_\_\_\_  
 Total Hrs. On Duty \_\_\_\_\_  
 Last 8 Days(3+4) \_\_\_\_\_  
 Total Hrs. On Duty \_\_\_\_\_  
 Last 7 Days(3+4) \_\_\_\_\_  
 Eight Hours Tomorrow \_\_\_\_\_  
 60 Minus ( ) \_\_\_\_\_  
 or \_\_\_\_\_  
 70 Minus ( ) \_\_\_\_\_  
 Code For Violation \_\_\_\_\_  
 On Duty \_\_\_\_\_

NO. 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 Miles
OFF DUTY	[Grid with vertical lines]																							24
DRIVING	[Grid with vertical lines]																							
ON DUTY (not driving)	[Grid with vertical lines]																							
ON DUTY (not driving)	[Grid with vertical lines]																							

(Starting Point or Place) \_\_\_\_\_ TO: \_\_\_\_\_ (Destination or turn around point or place)  
 USE TIME STANDARD AT HOME TERMINAL



(Date) (Day) (Year) (Total mileage today) (Total miles driving today)  
 I certify these entries are true and correct. (Signature) (Date) (Time Terminal Address)  
 (Name of Employer) (Name of Driver)  
 (Main Office Address) (Home Terminal Address)

(Name of Carrier) (Main Office Address) (Home Terminal Address)  
 PO Box 700 Kumbarton PA

NO. 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
OFF DUTY																								1
ASLEEP																								1 1/4
DRIVING																								9
ON DUTY																								1 3/4
NO. 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
OFF DUTY																								2 1/2

(Starting Point or Place) TO: (Destination or turn around point or place)  
 USE THIS STANDARD AT HOME TERMINAL

Total Hrs. Driving  
 Line 3  
 Total Hrs. On Duty  
 Last 8 Days(3+4)  
 Total Hrs. On Duty  
 Last 7 Days(3+4)  
 Eligible Hours Tomorrow  
 60 Mins (3)  
 or  
 70 Mins (2)  
 Code For Violation  
 Dr. 1/  
 On Duty

DRIVER'S DAILY LOG (One calendar day-24 hours)  
 Form prepared Under Bureau No. 64-2255  
 ORIGINAL file each day at home terminal  
 DUPLICATE Driver retains in log possession for one month  
 TRIPlicate Driver retains for copies

(Date) (Day) (Year) (Total mileage today) (Total miles driving today)  
 I certify these entries are true and correct. (Signature) (Date) (Time Terminal Address)  
 (Name of Employer) (Name of Driver)  
 (Main Office Address) (Home Terminal Address)

(Name of Carrier) (Main Office Address) (Home Terminal Address)  
 PO Box 700 Kumbarton PA

NO. 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
OFF DUTY																								1 1/2
ASLEEP																								12 1/2
DRIVING																								9 1/2
ON DUTY																								1 1/2
NO. 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
OFF DUTY																								2 1/2

(Starting Point or Place) TO: (Destination or turn around point or place)  
 USE THIS STANDARD AT HOME TERMINAL

Log No.  
 Total Hrs. Driving  
 Line 3  
 Total Hrs. On Duty  
 Last 8 Days(3+4)  
 Total Hrs. On Duty  
 Last 7 Days(3+4)  
 Eligible Hours Tomorrow  
 60 Mins (3)  
 or  
 70 Mins (2)  
 Code For Violation  
 Dr.  
 On Duty

95182

ation or  
y of its

(TOTAL MILES DRIVING TODAY)

(DRIVER'S SIGNATURE IN FULL)

MPC Trucks

None

(NAME OF CARRIER OR CARRIERS)

(NAME OF CO-DRIVER)

Po Box 700 Kimberton PA

S. J. King

(MAIN OFFICE ADDRESS)

(HOME TERMINAL ADDRESS)

	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																									2
2: SLEEPER BERTH																									10 1/2
3: DRIVING																									10
4: ON DUTY (NOT DRIVING)																									1 1/2

REMARKS

*Arbitration Co. Company*  
*Del. by J.K.*  
*Del. by J.K.*  
*Del. by J.K.*  
*Del. by J.K.*

Shipping document, manifest number, or name of shipper and commodity. Check the time and enter name of place you reported and where released from work and when and where each change of duty occurred. Exclude excess hours.

FROM: (STARTING POINT OR PLACE) TO: (DESTINATION OR TURN AROUND POINT OR PLACE) USE TIME STANDARD AT HOME TERMINAL

ON DUTY TODAY IN LAST 24 HOURS  
 70 PER DAY DRIVER  
 A. TOTAL HRS DUTY IN LAST 24 HOURS  
 B. TOTAL HRS ON DUTY IN LAST 24 HOURS  
 C. TOTAL HRS DUTY IN LAST 24 HOURS  
 D. TOTAL HRS ON DUTY IN LAST 24 HOURS

12 91  
 (Day) (Year)

DRIVER'S DAILY LOG

Form approved, Subject Bureau No. 04-7222  
 Original file each day at home terminal  
 Duplicate driver records in his possession for one month  
 Duplicate driver records in his possession for one month

618 (Total mileage today)

618 (Total miles driving today)

MPC Trucks  
 Po Box 700 Kimberton PA  
 (Main Office Address)

Identify place, origin, and terminal address. Vehicle numbers (Show each unit)  
 Driver's signature (in full)  
 Name of co-driver  
 Home Terminal Address

Log No.
Total Hrs. Driving
Line 3
Total Hrs. On Duty
Last 8 Days(3+4)
Total Hrs. On Duty
Last 7 Days(3+4)
Eligible Hours Tomorrow
60 Min (3)
or
75 Min (2)
Code For Violation
Or
On Duty

	1	2	3	4	5	6	7	8	9	10	11	NOON	1	2	3	4	5	6	7	8	9	10	11	Total Miles
DRIVING																								6 1/4
ON DUTY (NOT DRIVING)																								9 1/4
OFF DUTY																								2 1/4

document, manifest number, or name of a shipper, and commodity. Check the time and enter name of place you reported and where released from work and when and where each change of duty occurred. Exclude excess hours - Section 395.9 (2).

FROM: (Starting Point or Place) TO: (Destination or turn around point or place) USE TIME STANDARD AT HOME TERMINAL

7/12/91

42

MONTH (DAY) (YEAR)

(TOTAL MILEAGE TODAY)

429

I certify these entries are true and correct.

VEHICLE NUMBERS - (SHOW EACH UNIT)

*[Signature]*

(TOTAL MILES DRIVING TODAY)

(DRIVER'S SIGNATURE IN FULL)

*M/K Truck*

*None*

(NAME OF CARRIER OR CARRIERS)

(NAME OF CO-DRIVER)

*Pc Box 700 Kimberlin MI*

(HOME TERMINAL ADDRESS)

(MAIN OFFICE ADDRESS)

Operation of  
safety of its

	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	[Bar chart showing off-duty periods]																						2
2: SLEEPER BERTH	[Bar chart showing sleeper berth periods]																						9 1/2
3: DRIVING	[Bar chart showing driving periods]																						10
ON DUTY (NOT DRIVING)	[Bar chart showing on-duty non-driving periods]																						2 1/2

*my*

REMARKS

1  
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3  
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9  
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11  
NOON  
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5  
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7  
8  
9  
10  
11

*Answers*  
*Answers to*  
*Answers to*  
*Answers to*  
*Answers to*

Shipping document, manifest number, or name of consignor and commodity. Check the time and enter name of place you reported and where released from work and where and when each change of duty occurred. Explain excess hours.

FROM: (STARTING POINT OR PLACE) TO: (DESTINATION OR TURN AROUND POINT OR PLACE)

USE TIME STANDARD AT HOME TERMINAL

60 MI/7 DAY DRIVER

TOTAL MILE DUTY LAST 7 DAYS, INCLUDING TODAY

60 MI/7 DAY DRIVER

TOTAL MILE DUTY LAST 7 DAYS, INCLUDING TODAY

60 MI/7 DAY DRIVER

TOTAL MILE DUTY LAST 7 DAYS, INCLUDING TODAY