

DAILY LOG

Date - _____ Drivers Name - _____ Co-Driver Name - _____

Operator Name - _____

Cycle - 7 day / 14 day

P.P.O.B. Address - _____

Terminal Address - _____

End Odometer - _____

Start Odometer - _____

Distance Driven - _____

CMV Plate / Prov. - _____

Trailer Plate / Prov. - _____

<i>Personal</i>

Midnight 1 2 3 4 5 6 7 8 9 10 11 Noon 13 14 15 16 17 18 19 20 21 22 23 Midnight

	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	TOTAL
Off-Duty Time <small>Other than in Sleeper Berth</small>																								
Off-Duty Time <small>In a Sleeper Berth</small>																								
Driving Time																								
On Duty Time <small>Other Than Driving Time</small>																								

Remarks

Certified Accurate - _____

Off-Duty Deferral - Day 1 / Day 2