YOU ARE PAID FROM THIS REPORT

SCAN ALL DOCUMENTS

BOL YES / NO

LOG DATES ___/___/___ -- ___/___/___

THIS REPORT MUST BE COMPLETED IN DETAIL

Drive Safely

Tractor No.	Trailer No.
Driver Name – Last	First / Initial
Co-Driver Name – Last	First / Initial
Trip No.	Shipper

NO. OF PAGES TO SCAN _____

Empty Previous Load	
City	State
Trailer No.	Date

Tractor Fuel

PO Number	Date	Amount	Gals.	State	Name of Station
					Reefer Fuel

OTHER PO's

	Date	Amount	Description	Name of Station or Stop
	Tolls			
	Weight			
	Phone			
	Load/UL			

Trailer		
Drop Empty ☐		
Pickup Empty ☐		
Loaded ☐		
Loading Points City / State		Deadhead Rte.
State Entered Loaded		Route Traveled

Consignee (If more pickup or stop space needed, add additional list)	City / State	Date

Location	Drop Loaded Trailer City / State	Date

OUT OF POCKET EXPENSES

Tolls	$	MISCELLANEOUS EXPENSES	
Equipment Wash	$	1 - ATM Fees	$
Lumpers	$	2 – Equipment	$
Meals	$	3 - FedEx/UPS/Mail	$
Weight Tickets	$	4 - Permits, Cash	$
Lodging	$	5 - Phone Cards/Cell	$
Cash Fuel	$	Misc. Total (Add Boxes 1- 5)	
Repairs	$		

I VERIFY THE ABOVE INFORMATION AND ROUTE ARE CORRECT

SIGNED:

TRACTOR A 0 1 2 3 4 5 6 7 8 9

LOAD NUMBER 0 1 2 3 4 5 6 7 8 9

P R I J

PRIME inc.
P O BOX 4208
Springfield, MO 65808

P R I J