ORIGINAL:
Submit to employer

DRIVER'S DAILY LOG & TRIP SHEET

T 999999

NAME OF EMPLOYER _____ NAME OF DRIVER _____ DATE _____

EMPLOYEES ACCOMPANYING THE DRIVER

VEHICLE REGISTRATION NUMBER/S

Truck

Trailer/s

KILOMETRE READING

End of duty km

Start of duty km

Distance covered km

PLACE

Started

Ended

WORK TIME	MEAL BREAK	OFF-DUTY
From	From	From
To	To	To

WORK HOURS	Normal	Overtime	Sunday/Pub Hol

FILL UP	Fuel taken on	Lubricating oil
	litres	litres
Kilometre reading	km	

Trip	Consignment	Customer	Odometer	Time arrived	Time departed	Remarks / Additional detail

REMARKS _____

EMPLOYER'S SIGNATURE _____ *DRIVER'S SIGNATURE* _____

I certify that these entries are true and correct

SPECIMEN

Fully complies with the requirements of the Road Freight Industry National Bargaining Council, 31 De Korte St. Braamfontein, Johannesburg. Tel (011) 403-4900
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