

A Goff Transportation - CMV Bus Captain Trip Report

Bus Captain's Name: _____ Vehicle # _____

Instructions: Motor carriers, when using a driver for the first time or intermittently, shall obtain from the driver a signed statement giving the total time on duty during the immediately preceding 7 days and time at which such driver was last relieved from duty prior to beginning work for such carrier. Rule 395.8(j)(2) Federal Motor Carrier Safety Regulations.

Day	1	2	3	4	5	6	7	Total
Date								
Hours worked								

I hereby certify that the information given above is correct to the best of my knowledge and belief, and that I was last relieved from work at (Time) _____ on (Date) ____/____/200____.

(Signature): **X** _____ Date: ____/____/200____.

IFTA STATE FUEL TAX REPORT - MILEAGE AND FUEL RECORD

State	Start Mileage	End Mileage	Total Mileage	Fuel Gal	Fuel City
VA					
VA					
VA					
MD					
DC					
WV					
NC					
Other 1					
Other 2					

BUS CAPTAIN'S EXPENSES

Starting Cash	\$ _____	Expense Details	
Cash from Clients	\$ _____	Fuel	_____ \$ _____
Total Expenses	\$ _____	Tolls	_____ \$ _____
Ending Cash	\$ _____	Parking	_____ \$ _____
Cash Turned In	\$ _____	Other	_____ \$ _____
Balance	\$ _____	Total Exp	_____ \$ _____

Mangers Signature _____