

**ABC TRANSPORTATION**

Starting Mileage: \_\_\_\_\_ Ending Mileage: \_\_\_\_\_

**323 E FRONT ST**

Starting Time: \_\_\_\_\_ Ending Time: \_\_\_\_\_

Cash  
Fare  
Summary**MEDIA, PA 19063**

Deadhead Hours: \_\_\_\_\_ Deadhead Miles: \_\_\_\_\_

Gls Fuel Purchased: \_\_\_\_\_ Fuel Cost: \_\_\_\_\_

+ -	Sch Time	Act Time/ Odometer	Client Information	Pickup/Drop Off Information	Add'l Info
+	08:15	Tm: ----- Y N C	GARFIELD, JAMES (35) <b>AMB</b> (610)555-8822 Signature: _____	3433 PLUMSTEAD AVENUE  DREXEL HILL, PA 19026	Appt:08:45 ----- OpVeh:999 17:00
+	08:30	Tm: ----- Y N C	ADAMS, JOHN (4) <b>AMB</b> (555)555-5555 Signature: _____	527 SANDY BANK RD  MEDIA, PA 19063	Appt:09:00 ----- OpVeh:999 11:30
+	08:30	Tm: ----- Y N C	FILLMORE, MILLARD (28) <b>AMB</b> (555)555-5555 Signature: _____	982 MILLSON DR APT. 2 SPRINGFIELD, PA 19064	Appt:09:00 ----- OpVeh:999 16:30
+	08:30	Tm: ----- Y N C	FORD, GERALD (9) <b>AMB</b> (610)555-1122 Signature: _____	490 GLENWOOD LN  MEDIA, PA 19063	Appt:09:00 ----- OpVeh:999 16:30
+	08:30	Tm: ----- Y N C	JEFFERSON, THOMAS (6) <b>AMB</b> (610)555-2221 Signature: _____	86 E 5TH ST  MEDIA, PA 19063	Appt:09:00 ----- OpVeh:999 11:30
-	08:45	Tm: ----- Y N C	GARFIELD, JAMES (35) <b>AMB</b> Signature: _____	SPRINGFIELD HOSPITAL 169 W SPROUL RD  SPRINGFIELD, PA 19064	----- OpVeh:999 17:00
-	09:00	Tm: ----- Y N C	ADAMS, JOHN (4) <b>AMB</b> Signature: _____	HEALTHPLEX 169 W SPROUL RD  SPRINGFIELD, PA 19064	----- OpVeh:999 11:30
-	09:00	Tm: ----- Y N C	FILLMORE, MILLARD (28) <b>AMB</b> Signature: _____	SPRINGFIELD MALL 1328 BALTIMORE PIKE  SPRINGFIELD, PA 19064	----- OpVeh:999 16:30
-	09:00	Tm: ----- Y N C	FORD, GERALD (9) <b>AMB</b> Signature: _____	SPRINGFIELD MALL 1328 BALTIMORE PIKE  SPRINGFIELD, PA 19064	----- OpVeh:999 16:30
+	09:00	Tm: ----- Y N C	HOOVER, HERBERT (13) <b>AMB</b> (610)555-9999 Signature: _____	193 SANDY BANK RD  MEDIA, PA 19063	Appt:09:30 ----- OpVeh:999 13:30

+-	Sch Time	Act Time/ Odometer	Client Information	Pickup/Drop Off Information	Add'l Time
-	09:00	Tm: ----- Y N C	JEFFERSON, THOMAS (6) <b>AMB</b> Signature:_____	HEALTHPLEX 169 W SPROUL RD  SPRINGFIELD,PA 19064	----- OpVeh:999 11:30
-	09:30	Tm: ----- Y N C	HOOVER, HERBERT (13) <b>AMB</b> Signature:_____	DELAWARE CO COMM COLLEGE 533 NEWTOWN STREET RD  MARPLE,PA 19063	----- OpVeh:999 13:30
+	09:30	Tm: ----- Y N C	JOHNSON, LYNDON (32) <b>AMB</b> (610)555-3399 Signature:_____	233 E. BAKER ST.  MEDIA,PA 19063	Appt:10:00 ----- OpVeh:999 13:00
+	09:30	Tm: ----- Y N C	LINCOLN, ABRAHAM (3) <b>AMB</b> Signature:_____	1110 WOODDED WAY DRIVE  MEDIA,PA 19063	Appt:10:00 ----- OpVeh:999 13:00
-	10:00	Tm: ----- Y N C	JOHNSON, LYNDON (32) <b>AMB</b> Signature:_____	CROZER CHESTER MEDICAL CENTER 1 Medical Center Blvd  CHESTER,PA 19013	----- OpVeh:999 13:00
-	10:00	Tm: ----- Y N C	LINCOLN, ABRAHAM (3) <b>AMB</b> Signature:_____	CROZER CHESTER MEDICAL CENTER 1 Medical Center Blvd  CHESTER,PA 19013	----- OpVeh:999 13:00
+	11:30	Tm: ----- Y N C	ADAMS, JOHN (4) <b>AMB</b> Signature:_____	HEALTHPLEX 169 W SPROUL RD  SPRINGFIELD,PA 19064	----- OpVeh:999 08:30
+	11:30	Tm: ----- Y N C	JEFFERSON, THOMAS (6) <b>AMB</b> Signature:_____	HEALTHPLEX 169 W SPROUL RD  SPRINGFIELD,PA 19064	----- OpVeh:999 08:30
-	12:00	Tm: ----- Y N C	ADAMS, JOHN (4) <b>AMB</b> (555)555-5555 Signature:_____	527 SANDY BANK RD  MEDIA,PA 19063	----- OpVeh:999 08:30
-	12:00	Tm: ----- Y N C	JEFFERSON, THOMAS (6) <b>AMB</b> (610)555-2221 Signature:_____	86 E 5TH ST  MEDIA,PA 19063	----- OpVeh:999 08:30
+	13:00	Tm: ----- Y N C	JOHNSON, LYNDON (32) <b>AMB</b> Signature:_____	CROZER CHESTER MEDICAL CENTER 1 Medical Center Blvd  CHESTER,PA 19013	----- OpVeh:999 09:30

+-	Sch Time	Act Time/ Odometer	Client Information	Pickup/Drop Off Information	Add'l Time
+	13:00	Tm: ----- Y N C	LINCOLN, ABRAHAM (3) <b>AMB</b> Signature: _____ Physical Therapy	CROZER CHESTER MEDICAL CENTER 1 Medical Center Blvd  CHESTER,PA 19013	----- OpVeh:999 09:30
+	13:00	Tm: ----- Y N C	NIXON, RICHARD (33) <b>AMB</b> (610)555-8877 Signature: _____ HONK WHEN ARRIVE	137 HALDEMAN AVE.  MEDIA,PA 19063	Appt:13:30 ----- OpVeh:999 15:30
+	13:00	Tm: ----- Y N C	PIERCE, FRANKLIN (359) <b>AMB</b> Signature: _____	101 N FEATHERING RD  MEDIA,PA 19063	Appt:13:30 ----- OpVeh:999 15:30
+	13:30	Tm: ----- Y N C	HOOVER, HERBERT (13) <b>AMB</b> Signature: _____	DELAWARE CO COMM COLLEGE 533 NEWTOWN STREET RD  MARPLE,PA 19063	----- OpVeh:999 09:00
-	13:30	Tm: ----- Y N C	JOHNSON, LYNDON (32) <b>AMB</b> (610)555-3399 Signature: _____ Physical Therapy	233 E. BAKER ST.  MEDIA,PA 19063	----- OpVeh:999 09:30
-	13:30	Tm: ----- Y N C	LINCOLN, ABRAHAM (3) <b>AMB</b> Signature: _____ Physical Therapy	1110 WOODDED WAY DRIVE  MEDIA,PA 19063	----- OpVeh:999 09:30
-	13:30	Tm: ----- Y N C	NIXON, RICHARD (33) <b>AMB</b> (610)555-6000 Signature: _____ HONK WHEN ARRIVE	RIDDLE MEMORIAL HOSPITAL 1068 W BALTIMORE PIKE  MEDIA,PA 19063	----- OpVeh:999 15:30
-	13:30	Tm: ----- Y N C	PIERCE, FRANKLIN (359) <b>AMB</b> (610)555-6000 Signature: _____	RIDDLE MEMORIAL HOSPITAL 1068 W BALTIMORE PIKE  MEDIA,PA 19063	----- OpVeh:999 15:30
-	14:00	Tm: ----- Y N C	HOOVER, HERBERT (13) <b>AMB</b> (610)555-9999 Signature: _____	193 SANDY BANK RD  MEDIA,PA 19063	----- OpVeh:999 09:00
+	15:30	Tm: ----- Y N C	NIXON, RICHARD (33) <b>AMB</b> (610)555-6000 Signature: _____ HONK WHEN ARRIVE	RIDDLE MEMORIAL HOSPITAL 1068 W BALTIMORE PIKE  MEDIA,PA 19063	----- OpVeh:999 13:00
+	15:30	Tm: ----- Y N C	PIERCE, FRANKLIN (359) <b>AMB</b> (610)555-6000 Signature: _____	RIDDLE MEMORIAL HOSPITAL 1068 W BALTIMORE PIKE  MEDIA,PA 19063	----- OpVeh:999 13:00

+-	Sch Time	Act Time/ Odometer	Client Information	Pickup/Drop Off Information	Add'l Time
-	16:00	Tm: ----- Y N C	NIXON, RICHARD (33) <b>AMB</b> (610)555-8877 Signature: _____ HONK WHEN ARRIVE	137 HALDEMAN AVE.  MEDIA,PA 19063	----- OpVeh:999 13:00
-	16:00	Tm: ----- Y N C	PIERCE, FRANKLIN (359) <b>AMB</b> Signature: _____	101 N FEATHERING RD  MEDIA,PA 19063	----- OpVeh:999 13:00
+	16:30	Tm: ----- Y N C	FILLMORE, MILLARD (28) <b>AMB</b> Signature: _____	SPRINGFIELD MALL 1328 BALTIMORE PIKE  SPRINGFIELD,PA 19064	----- OpVeh:999 08:30
+	16:30	Tm: ----- Y N C	FORD, GERALD (9) <b>AMB</b> Signature: _____	SPRINGFIELD MALL 1328 BALTIMORE PIKE  SPRINGFIELD,PA 19064	----- OpVeh:999 08:30
+	17:00	Tm: ----- Y N C	BUCHANAN, JAMES (29) <b>AMB</b> Signature: _____	COMMERCE BANK 4 W BALTIMORE AVE  MEDIA,PA 19063	----- OpVeh:
-	17:00	Tm: ----- Y N C	FILLMORE, MILLARD (28) <b>AMB</b> (555)555-5555 Signature: _____	982 MILLSON DR APT. 2 SPRINGFILED,PA 19064	----- OpVeh:999 08:30
-	17:00	Tm: ----- Y N C	FORD, GERALD (9) <b>AMB</b> (610)555-1122 Signature: _____	490 GLENWOOD LN  MEDIA,PA 19063	----- OpVeh:999 08:30
+	17:00	Tm: ----- Y N C	GARFIELD, JAMES (35) <b>AMB</b> Signature: _____	SPRINGFIELD HOSPITAL 169 W SPROUL RD  SPRINGFIELD,PA 19064	----- OpVeh:999 08:15
-	17:30	Tm: ----- Y N C	BUCHANAN, JAMES (29) <b>AMB</b> Signature: _____	83 FOREST ROAD  SPRINGFIELD,PA 19064	----- OpVeh:
-	17:30	Tm: ----- Y N C	GARFIELD, JAMES (35) <b>AMB</b> (610)555-8822 Signature: _____	3433 PLUMSTEAD AVENUE  DREXEL HILL,PA 19026	----- OpVeh:999 08:15
-	TBS	Tm: ----- Y N C	HARDING, WARREN (30) <b>AMB</b> (555)123-4567 Signature: _____	867 NORTH AVE  SPRINGFIELD,PA 19064	----- OpVeh:

+-	Sch Time	Act Time/ Odometer	Client Information	Pickup/Drop Off Information	Add'l Time
+	TBS	Tm: ----- Y N C	HARDING, WARREN (30) <b>AMB</b> Signature: _____	MEDIA COURTHOUSE 241 W FRONT ST MEDIA, PA 19063	----- OpVeh:

My signature acknowledges that NO incidents/accidents have gone unreported during my shift. If an incident/accident has occurred the supervisor/dispatcher has written my statement into the log.

The report number is \_\_\_\_\_. If more than one incident/accident has occurred, the additional log report number(s) are as follows:

\_\_\_\_\_

**Vehicle Driver:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Vehicle Aide:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Supervisor/Disp:** \_\_\_\_\_ **Date:** \_\_\_\_\_