

|                         |   |   |  |                    |
|-------------------------|---|---|--|--------------------|
| Account Number<br>42707 | Registrant Name<br>Rybicki Trucking Co., Inc. | 9365 North Parma Road<br>Springport, MI 49284 | Driver's Name<br>Patrick Green             | Driver's Signature |
| Fleet Number<br>001     | Vin Number<br>1XKWDB9X94J052757               |   | Trip Origin<br>City _____ State _____      | Beginning Odometer |
| Pro Number<br>R         | Unit Number<br>701                            |   | Trip Destination<br>City _____ State _____ | End Odometer       |

|   | State | Date | Route | Odometer Reading<br>A. At Beginning Of Trip<br>B. When Exiting State<br>C. At End Of Trip | Loaded<br>Empty | Miles | Name City/State<br>Fuel Stop | Fuel<br>Gallons |
|---|-------|------|-------|---|-----------------|-------|------------------------------|-----------------|
| 1 |       |      |       | A   | L<br>E          |       |                              |                 |
|   |       |      |       | B   |                 |       |                              |                 |
|   |       |      |       | C   |                 |       |                              |                 |
| 2 |       |      |       | A   | L<br>E          |       |                              |                 |
|   |       |      |       | B   |                 |       |                              |                 |
|   |       |      |       | C   |                 |       |                              |                 |
| 3 |       |      |       | A   | L<br>E          |       |                              |                 |
|   |       |      |       | B   |                 |       |                              |                 |
|   |       |      |       | C   |                 |       |                              |                 |
| 4 |       |      |       | A   | L<br>E          |       |                              |                 |
|   |       |      |       | B   |                 |       |                              |                 |
|   |       |      |       | C   |                 |       |                              |                 |
| 5 |       |      |       | A   | L<br>E          |       |                              |                 |
|   |       |      |       | B   |                 |       |                              |                 |
|   |       |      |       | C   |                 |       |                              |                 |
| 6 |       |      |       | A   | L<br>E          |       |                              |                 |
|   |       |      |       | B   |                 |       |                              |                 |
|   |       |      |       | C   |                 |       |                              |                 |
| 7 |       |      |       | A   | L<br>E          |       |                              |                 |
|   |       |      |       | B   |                 |       |                              |                 |
|   |       |      |       | C   |                 |       |                              |                 |