Company Name

Driver's Name

Unit (Truck) #

Starting Point

5322 N 59th Ave, Suite K
Glendale AZ 85301
Mailing: P O BOX 14650
Phoenix AZ 85063

Phone: (623) 937-9869
Fax: (623) 934-4548

TCS

THIS FORM MUST BE TURNED INTO OUR OFFICE BY THE 5th AND NO LATER THAN THE 10th OF THE FOLLOWING MONTH

DATE	TRIP #	SHIPPER	FROM	TO

DATE	ROUTES - from load, unload or state line	CITY, STATE Use a new line at load, unload, state line	ODOMETER READING		LOADED MILES	EMPTY MILES	TOLL MILES
			BEGIN MILES	END MILES			

FUEL PURCHASES

Vendors Name	City	State	Invoice No	Gallons

Rev 11/03 rh