

# TRAILER REPORT

## PAYNE TRANSPORTATION LP

435 LUCAS AVENUE  
 BOX 67, GROUP 200, RR#2  
 WINNIPEG, MANITOBA  
 R3C 2E6

CONTRACTOR: \_\_\_\_\_

TRAILER #: \_\_\_\_\_

## CONTRACTOR'S MAINTENANCE & REPAIR REPORT

THIS REPORT IS TO COVER FROM THE 1<sup>ST</sup> DAY OF THE MONTH TO THE LAST DAY OF THE MONTH AND MUST BE SUBMITTED TO SAFETY DEPARTMENT BY THE 15<sup>TH</sup> OF THE NEXT MONTH.

PERIOD COVERED					
FROM			TO		
MONTH	DAY	YEAR	MONTH	DAY	YEAR

ITEM	DATE OF WORK PERFORMED	PARTS PURCHASED	NATURE OF WORK PERFORMED	PERSON OR FIRM PERFORMING WORK	LOCATION WHERE WORK PERFORMED
1					
2					
3					
4					
5					
6					
7					
8					

I CERTIFY THAT THE ABOVE ENTRIES ARE TRUE AND CORRECT

\_\_\_\_\_  
 CONTRACTOR'S SIGNATURE

\_\_\_\_\_  
 IF NOT THE CONTRACTOR – SIGN YOUR NAME ALSO