



Express & Logistics

P.O.Box 1693

Taylor, MI 48180

734-946-2052 • Fax: 734-946-2052

DRIVERS PROOF OF DETENTION

Date _____

Pick-Up or Delivery _____

Company Name _____

Driver Unit # _____

Scheduled Appointment Time _____

Actual Arrival Time _____

Departure Time _____

Additional Notes _____

Please Sign:

Authorized Signature

Authorized Printed Name

Driver's Signature

Driver's Printed Name