CREW DAILY HOURLY ACCOUNTING REPORT

[Refer to the current instruction sheet for completion.]

Name of Tug: Gladys B. | Date: 2-8-07 | Day: ~~Fri~~ Thurs.

	0001 – 0100	0101 – 0200	0201 – 0300	0301 – 0400	0401 – 0500	0501 – 0600	0601 – 0700	0701 – 0800	0801 – 0900	0901 – 1000	1001 – 1100	1100 – 1200	1201 – 1300	1301 – 1400	1401 – 1500	1501 – 1600	1601 – 1700	1701 – 1800	1801 – 1900	1901 – 2000	2001 – 2100	2101 – 2200	2201 – 2300	2301 - 2400	
Captain K. LeBlanc	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	45	30	30	—	30	24
Total of Time Worked In 24-Hours Prior to Each Hour (Hours / Minutes)	—	—	—	—	—	—	—	—	—	—	—	—	0/00	—	—	—	—	—	—	9/15	9/45	1/15	2/15	2/45	
Relief Captain																									
Total of Time Worked In 24-Hours Prior to Each Hour (Hours / Minutes)																									
Wheelman																									
Total of Time Worked In 24-Hours Prior to Each Hour (Hours / Minutes)																									
Engineer R. Lacour							01	—	—	—	—	—	—	—	—	—	—	59							24
Engineer / Oiler																									
Deckhand B. Kelly	—	—	—	—	—	59													01	—	—	—	—	—	24
Deckhand																									

Notes:

Crew Change Time: _____ Crew Change Place: _____ Launch Used: YES / NO

Arrival time at base: _____ Reason for late return to base: _____

Names of persons arriving late at base: _____

I hereby personally certify that this hourly accounting is correct (Captain's Signature): [redacted]

This report must be transmitted by facsimile to the office (504-831-6701) not later than 1200 of the following day.

CREW DAILY HOURLY ACCOUNTING REPORT

[Refer to the current instruction sheet for completion.]

Name of Tug: Gladys B. **Date:** 2-9-07 **Day:** Fri.

	0001 – 0100	0101 – 0200	0201 – 0300	0301 – 0400	0401 – 0500	0501 – 0600	0601 – 0700	0701 – 0800	0801 – 0900	0901 – 1000	1001 – 1100	1100 – 1200	1201 – 1300	1301 – 1400	1401 – 1500	1501 – 1600	1601 – 1700	1701 – 1800	1801 – 1900	1901 – 2000	2001 – 2100	2101 – 2200	2201 – 2300	2301 - 2400	
Captain K. LeBlanc	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	24
Total of Time Worked In 24-Hours Prior to Each Hour (Hours / Minutes)	—	—	—	—	—	—	—	—	—	—	—	—	0/00	—	—	—	—	—	—	—	—	—	—	—	
Relief Captain																									
Total of Time Worked In 24-Hours Prior to Each Hour (Hours / Minutes)																									
Wheelman																									
Total of Time Worked In 24-Hours Prior to Each Hour (Hours / Minutes)																									
Engineer R. Lacour							01	—	—	—	—	—	—	—	—	—	—	59							24
Engineer / Oiler																									
Deckhand B. Kelly	—	—	—	—	—	59													01	—	—	—	—	—	24
Deckhand																									

Notes:

Crew Change Time: _____ **Crew Change Place:** _____ **Launch Used:** YES / NO

Arrival time at base: _____ **Reason for late return to base:** _____

Names of persons arriving late at base: _____

I hereby personally certify that this hourly accounting is correct (Captain's Signature): [redacted]

This report must be transmitted by facsimile to the office (504-831-6701) not later than 1200 of the following day.

CREW DAILY HOURLY ACCOUNTING REPORT

[Refer to the current instruction sheet for completion.]

Name of Tug: Gladewp B. **Date:** 2-10-07 **Day:** SAT.

	0001 – 0100	0101 – 0200	0201 – 0300	0301 – 0400	0401 – 0500	0501 – 0600	0601 – 0700	0701 – 0800	0801 – 0900	0901 – 1000	1001 – 1100	1100 – 1200	1201 – 1300	1301 – 1400	1401 – 1500	1501 – 1600	1601 – 1700	1701 – 1800	1801 – 1900	1901 – 2000	2001 – 2100	2101 – 2200	2201 – 2300	2301 - 2400	
Captain K. LeBlanc	X	X	X	X	X	30	—	—	—	—	—	—	—	—	—	—	—	—	59	X	X	X	X	X	24
Total of Time Worked In 24-Hours Prior to Each Hour (Hours / Minutes)	0/00	—	—	—	—	0/30	1/30	2/30	3/30	4/30	5/30	6/30	7/30	8/30	9/30	10/30	11/30	12/30	13/30	—	—	—	—	—	
Relief Captain																									
Total of Time Worked In 24-Hours Prior to Each Hour (Hours / Minutes)																									
Wheelman																									
Total of Time Worked In 24-Hours Prior to Each Hour (Hours / Minutes)																									
Engineer R. Lacour							01	—	—	—	—	—	—	—	—	—	—	59							24
Engineer / Oiler																									
Deckhand B. Kelley	—	—	—	—	—	59													01	—	—	—	—	—	24
Deckhand																									

Notes:

Crew Change Time: _____ **Crew Change Place:** _____ **Launch Used:** YES / NO

Arrival time at base: _____ **Reason for late return to base:** _____

Names of persons arriving late at base: _____

I hereby personally certify that this hourly accounting is correct (Captain's Signature): [redacted]

This report must be transmitted by facsimile to the office (504-831-6701) not later than 1200 of the following day.