INVESTIGATION OF ACCIDENT
Mexican Hat, Utah

Hwy-08-MH-012

USDOT Annual Report for Arrow Stage Line
Drug and Alcohol Testing

ATTACHMENT D

(2 pages)

U.S. DEPARTMENT OF TRANSPORTATION DRUG AND ALCOHOL TESTING MIS DATA COLLECTION FORM

Calendar Year Covered by this Report: 2007

I. Employer:

Company Name: Arrow Stage Line 100492

Doing Business As (DBA) Name (if applicable):

Address: 720 East Norfolk Avenue, Norfolk, NE 68701 E-mail: janice@arrowstagelines.co

Name of Certifying Official: Signature:

Telephone: (800) 672-8302 Date Certified:

Prepared by (if different): Telephone:

C/TPA Name and Telephone (if applicable): MEDICAL ENTERPRISES, INC. 402-393-8826

Check the DOT agency for which you are reporting MIS data; and complete the information on that same line as appropriate:

X FMCSA - Motor Carrier: DOT#: Owner-operator: (circle one) YES or NO Exempt (Circle one) YES or NO

___ FAA - Aviation: Certificate # (if applicable): Plan / Registration # (if applicable):

___ RSPA - Pipeline (Check) Gas Gathering Gas Transmission Gas Distribution Transport Hazardous Liquids Transport Carbon Dioxide

___ FRA - Railroad: Total number of observed/documented Part 219 "Rule G" Observations for covered employees:

___ USCG - Maritime: Vessel ID # (USCG- or State Issued): (If more than one vessel, list separately)

___ FTA - Transit

II. Covered Employees: (A) Enter Total Number Safety Sensitive Employees in All Employee Categories: 353

(B) Enter Total Number of Employee Categories: 1

(C)

Employee Category	Total Number of Employees in this Category
Driver	353

If you have multiple employee categories, complete Sections I and II (A) & (B). Take that filled-in form and make one copy for each employee category and complete Sections II(C), III, and IV for each separate employee category.

III. Drug Testing Data:

Type of Test (1)	Total Number of test Results (Should equal the sum of Columns 2, 3, 9, 10, 11 and 12) (2)	Verified Negative Results (3)	Verified Positive Results - For One Or More Drugs (4)	Positive for Marijuana (5)	Positive for Cocaine (6)	Positive for PCP (7)	Positive for Opiates (8)	Positive for Amphetamines (9)	Refusal Results: Adulterated (10)	Refusal Results: Substituted (11)	Refusal Results: "Shy Bladder" With No Medical Explanation (12)	Refusal Results: Other Refusals To Submit To Testing (13)	Canceled Results
Pre-Employment	173	172	1	1	0	0	0	0	0	0	0	0	0
Random	176	176	0	0	0	0	0	0	0	0	0	0	0
Post-Accident	2	2	0	0	0	0	0	0	0	0	0	0	0
Reasonable Susp./Cause	0	0	0	0	0	0	0	0	0	0	0	0	0
Return-To-Duty	0	0	0	0	0	0	0	0	0	0	0	0	0
Follow-Up	0	0	0	0	0	0	0	0	0	0	0	0	0
TOTAL	351	350	1	1	0	0	0	0	0	0	0	0	0

IV. Alcohol Testing Data:

Type of Test (1)	Total Number Of Screening Test Results (Should equal the sum of Columns 2, 3, 7 and 8) (2)	Screening Tests With Results Below 0.02 (3)	Screening Tests With Results 0.02 Or Greater (4)	Number Of Confirmation Test Results (5)	Confirmation Tests With Results 0.02 Through 0.039 (6)	Confirmation Tests With Results 0.04 Or Greater (7)	Refusal Results: "Shy Lung" With No Medical Explanation (8)	Refusal Results: Other Refusals To Submit To Testing (9)	Canceled Results
Pre-Employment	0	0	0	0	0	0	0	0	0
Random	37	37	0	0	0	0	0	0	0
Post-Accident	0	0	0	0	0	0	0	0	0
Reasonable Susp./Cause	0	0	0	0	0	0	0	0	0
Return-To-Duty	0	0	0	0	0	0	0	0	0
Follow-Up	0	0	0	0	0	0	0	0	0
TOTAL	37	37	0	0	0	0	0	0	0