

Daily Time Record (DTR)

FRONT

No. _____ Pay Ending _____ 20__

Name _____ Position _____

Dept. _____ Age _____

Hours	Rate	Amount	DEDUCTIONS	ABSENCES		
Reg				Fines		
Over				Withholding Tax		
				S-S-S		
Total Earnings						
Less Deductions						
NET PAY			TOTAL			

Days	MORNING		AFTERNOON		OVERTIME	
	IN	OUT	IN	OUT	IN	OUT
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						

I hereby certify that the above records are true and correct.

BACK

No. _____ Pay Ending _____ 20__

Name _____ Position _____

Dept. _____ Age _____

Hours	Rate	Amount	DEDUCTIONS	ABSENCES		
Reg				Fines		
Over				Withholding Tax		
				S-S-S		
Total Earnings						
Less Deductions						
NET PAY			TOTAL			

Days	MORNING		AFTERNOON		OVERTIME	
	IN	OUT	IN	OUT	IN	OUT
16						
17						
18						
19						
20						
21						
22						
23						
24						
25						
26						
27						
28						
29						
30						
31						

I hereby certify that the above records are true and correct.

