

# DT DRIVER SHEET

DATE \_\_\_\_\_

DRIVER NAME \_\_\_\_\_

DRIVER # \_\_\_\_\_

VIN# (LAST 6)	STOCK#	TIME START	TIME END	HOURS	FUEL	OFFICE NOTES
ROUTE DESCRIPTION						
REQUESTED BY						
MANAGER PRINTED SIGNATURE						

VIN# (LAST 6)	STOCK#	TIME START	TIME END	HOURS	FUEL	OFFICE NOTES
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**\$8/HR x** \_\_\_\_\_ **HOURS =** \_\_\_\_\_ **TOTAL HOURS** \_\_\_\_\_  
**TOTAL EXPENSES** \_\_\_\_\_  
**TOTAL PAYROLL ACCRUAL** \_\_\_\_\_

\*\*\* INCOMPLETE FORM WILL RESULT IN NO PAYMENT