

INTERPRETERS SIGN OFF SHEET

INTEPRETER'S NAME	
DATE	
BOOKING TIME	
VENUE	
CLIENT NAME	
REFERENCE NUMBER	
LANGUAGE	
D-U-R-A-T-I-O-N	

IMPORTANT NOTE: For all future bookings, please contact **PLS** directly. Interpreters are not allowed to take any future bookings without prior written acknowledgement of **PLS**. This is due to operational and liability insurance purposes.

CLIENT'S LEGAL REPRESENTATIVE:

NAME: _____ SIGNATURE: _____

COMPANY: _____ DATE: _____

INTERPRETER:

IN AND OUT TRAVEL TIME	
TRAVEL FARE	

SIGNATURE: _____ DATE: _____

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