INTERPRETER’S SIGN OFF SHEET

|  |  |
| --- | --- |
| INTERPRETER’S NAME |   |
| DATE |   |
| BOOKING TIME |   |
| VENUE |   |
| CLIENT’S NAME |   |
| FILE REFERENCE NUMBER |   |
| LANGUAGE |   |
| DURATION |   |

**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 for operational and liability purposes.

**Client’s Legal Representative:**

|  |  |
| --- | --- |
| NAME |   |
| COMPANY |   |
| SIGNATURE |   |
| DATE |   |

**Interpreter:**

|  |  |
| --- | --- |
| IN AND OUT TRAVEL TIME |   |
| TRAVEL FARE / MILEAGE |   |
| INTERPRETER’S POSTCODE |   |

**INTERPRETER’S SIGNATURE: DATE:**

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**E:** info@perfectlanguageservices.com

**W:** perfectlanguageservices.com

**Registered Company Number:** 10853350

**Registered Company Address:** 19 Margil House, Singapore Road, London, United Kingdom, W13 0FD