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:**

**T:** 07863 631 481

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**W:** perfectlanguageservices.com

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