

# LEGAL-WORLD INTERPRETING, LTD.

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**\*\*\*MUST BE RETURNED WITHIN 24 HOURS OF JOB COMPLETION\*\*\***

**FAX, OR EMAIL TO [INVOICES@LWINTERPRETING.COM](mailto:INVOICES@LWINTERPRETING.COM)**

Job Number \_\_\_\_\_ Interpreter \_\_\_\_\_

Date: \_\_\_\_\_ Name of Witnesses (please complete)

Location: \_\_\_\_\_ 1. \_\_\_\_\_

\_\_\_\_\_ 2. \_\_\_\_\_

Language: \_\_\_\_\_ 3. \_\_\_\_\_

Caption: \_\_\_\_\_

Start Time: \_\_\_\_\_ Finish Time: \_\_\_\_\_ Billable Hours: \_\_\_\_\_

## Appearances

1) Name of Firm: \_\_\_\_\_ 3) Name of Firm: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_

\_\_\_\_\_

File/Claim: \_\_\_\_\_ [ %] File/Claim: \_\_\_\_\_ [ %]

Attorney: \_\_\_\_\_ Attorney: \_\_\_\_\_

2) Name of Firm: \_\_\_\_\_ 4) Name of Firm: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_

\_\_\_\_\_

File/Claim: \_\_\_\_\_ [ %] File/Claim: \_\_\_\_\_ [ %]

Attorney: \_\_\_\_\_ Attorney: \_\_\_\_\_

\_\_\_\_\_

## Interpreter Invoice Information

Rate: \$ \_\_\_\_\_ X Hours: \_\_\_\_\_ = \$ \_\_\_\_\_ Travel: Mileage .58 X \_\_\_\_\_ = \$ \_\_\_\_\_

(Outside of 5 Boro's- NYC )

Expenses (gas, tolls): \$ \_\_\_\_\_ Total Bill: \$ \_\_\_\_\_

For Office Use Only:

Received: \_\_\_\_\_ Paid: \_\_\_\_\_ Check #: \_\_\_\_\_