

**Request Form for Interpretive Services**

Date/time of request \_\_\_\_\_

Name of person requesting services \_\_\_\_\_

Type of service requested \_\_\_\_\_

Name of meeting \_\_\_\_\_ Date of meeting \_\_\_\_\_

Time of meeting \_\_\_\_\_ Est. length of meeting \_\_\_\_\_

Meeting location/room \_\_\_\_\_

Email/phone of person making request \_\_\_\_\_

Name of person who took request \_\_\_\_\_



**Interpretive Services Provider Contacted for Above Request**

Date \_\_\_\_\_

Service provider contacted \_\_\_\_\_  
(Corporate name)

If available, name of interpreter who will attend meeting \_\_\_\_\_

Service provider email/phone \_\_\_\_\_

**Inform the Provider of the Following:**

Please note that all interpreters are required to come to the Office of Legislative Research and General Counsel to sign a certification that they did in fact provide interpretive services for the requested meeting. Failure to do so may result in delayed or non-payment of services.

\*Office note: A copy of this form should be forwarded to the office manager with the accompanying Certification of Provided Interpretive Services when completed.

### **Certification of Provided Interpretive Services**

Please complete the following form to certify that you provided interpretive services to be billed to the Office of Legislative Research and General Counsel. Failure to complete the certification may result in delayed or non-payment of services.

Name (print) \_\_\_\_\_

Company \_\_\_\_\_

Company email/phone \_\_\_\_\_

Name of meeting \_\_\_\_\_

Meeting location/room \_\_\_\_\_

Date of meeting \_\_\_\_\_

Service provided \_\_\_\_\_

Number of interpreting hours/minutes provided \_\_\_\_\_

I certify, under penalty of perjury or other applicable law, that I provided the described interpretive services for the time and at the location indicated.

Signature of interpreter \_\_\_\_\_

Date \_\_\_\_\_

\*Office note: A copy of this form should be forwarded to the office manager with the accompanying Request Form for Interpretive Services when completed.