



INTERPRETER TIMESHEET (Rev.11/21/24)

Interpreter Name: _____

Interpreter Signature: _____

Total Hours: _____

Date	For interpreting: Start/ End Times	Client Name	Language	Case #	Attorney/VLP Case Handler	Length of appt.	Location for Interpreting or "Translation"

Date: _____

PLEASE NOTE THAT A VLP STAFF MEMBER OR PANEL ATTORNEY MUST INITIAL THE TIME SHEET IN THE SPACE ALLOTTED.

All timesheets must be submitted on a monthly basis. Timesheets submitted 30 days after the date of first entry may not be paid out. If you have any questions, please contact Emelia Andres: (857) 320-6446 or email at: eandres@vlpnet.org