

## TIME RECORD AND INVOICE

**BILL TO:**

Dantli Corp  
[timesheet@dantlicorp.com](mailto:timesheet@dantlicorp.com)

Invoice # \_\_\_\_\_

**Location of Assignment:** \_\_\_\_\_

Provider's Name: \_\_\_\_\_

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

City/State/Zip: \_\_\_\_\_

Phone #: \_\_\_\_\_



| DATE | START TIME | END TIME | TOTAL HRS | CLIENT SIGNATURE | SURVEY   |   |   |   |   | COMMENTS |
|------|------------|----------|-----------|------------------|--|---|---|---|---|----------|
|      |            |          |           |                  | Please rate the interpreter's service.<br>5 = Exceptional; 4 = Great; 3 = Average;<br>2 = Poor; 1 = Unacceptable |   |   |   |   |          |
|      |            |          |           |                  | 5  | 4 | 3 | 2 | 1 |          |
|      |            |          |           |                  | 5  | 4 | 3 | 2 | 1 |          |
|      |            |          |           |                  | 5  | 4 | 3 | 2 | 1 |          |
|      |            |          |           |                  | 5  | 4 | 3 | 2 | 1 |          |
|      |            |          |           |                  | 5  | 4 | 3 | 2 | 1 |          |
|      |            |          |           |                  | 5  | 4 | 3 | 2 | 1 |          |
|      |            |          |           |                  | 5  | 4 | 3 | 2 | 1 |          |

TIME FRAME:

Start Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

End Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

TOTAL HRS : \_\_\_\_\_

Provider's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**PLEASE SUBMIT DOCUMENT TO [TIMESHEET@DANTLICORP.COM](mailto:TIMESHEET@DANTLICORP.COM)**

**NO LATER THAN MONDAY AT 12:00 P.M. EST**