

HEMPFIELD SCHOOL DISTRICT
Landisville, Pennsylvania

**EDUCATIONAL INTERPRETER/TRANSLATOR
INVOICE**

This invoice is for payment of interpreting and/or translating services. This form must be completed in its entirety, verified and signed by the building principal, then forwarded to the office of the assistant superintendent for authorization.

NAME OF INTERPRETER/TRANSLATOR: _____

ADDRESS: _____

PHONE NUMBER: _____ SOCIAL SECURITY #: _____

SERVICE PROVIDED TO (SCHOOL NAME): _____

PERSON REQUESTING SERVICE: _____

DISTRICT CONTACT: _____

DETAILED EXPLANATION OF/AND REASON FOR SERVICE: _____

DATE OF SERVICE: _____ TIME OF SERVICE: _____

HOURLY RATE _____ X _____ HOURS HOURLY RATE TOTAL _____

MILEAGE FROM: _____ TO: _____ = _____ # of MILES X \$0.545 IRS RATE

MILEAGE TOTAL _____

TOTAL AMOUNT DUE _____

Interpreter's/Translator's Signature

Principal's Signature

Interpreter's/Translator's Name Printed

Account Code

Assistant Superintendent's Signature

Hempfield School District

Landisville, PA

Mileage Chart

	ADM/ LEC	CES	EPES	FES	LPC/ LIC	MES	RES	CMS	LMS/ MAINT	HHS	IU-13
ADM/LEC	-	3	4	5	0.5	5	5	3	0.6	0.3	8.3
CES	3	-	4	4.4	2.5	2.6	3.1	0.1	2.6	3.3	8.3
EPES	4	4	-	9.7	4.6	6.7	3.8	4.1	4.7	4.3	5.8
FES	5	4.4	9.7	-	4.7	3.8	7.9	4.3	4.8	5.2	12.8
LPC/LIC	0.5	2.5	4.6	4.7	-	4	5.1	2.4	0.1	0.8	8.9
MES	5	2.6	6.7	3.8	4	-	4.7	3	4.1	4.8	9
REC	4.7	2.7	3.6	5.9	4.9	4.8	0.3	2.6	5	5	6.1
RES	5	3.1	3.8	7.9	5.1	4.7	-	3	5.2	5.2	6.4
CMS	3	0.1	4.1	4.3	2.4	3	3	-	2.5	3.4	8.2
LMS/MAINT	0.6	2.6	4.7	4.8	0.1	4.1	5.2	2.5	-	0.9	9.2
HHS	0.3	3.3	4.3	5.2	0.8	4.8	5.2	3.4	0.9	-	8.7
IU-13	8.3	8.3	5.8	12.8	8.9	9	6.4	8.2	9.2	8.7	-