Hearing, Speech & Deaf Center 1625 19th Avenue, Seattle, WA 98122 (206) 632-7100 voice **Interpreting Services** (206) 632-0405 fax Verification Form Interpreting@hsdc.org (FEIN 91-0681207) **Date of Service Job Number** Customer **Location of Service Scheduled Start Time Actual Start Time Client Name Scheduled End Time Actual End Time Interpreter Name** By signing this, I confirm that the interpreter was present. Approved Parking Notes: (Receipt must be attached) Approved Mileage: Print Name _____ Cancel < 24 Hrs Signature Cancelled onsite

Interpreter Signature: _

1625 19th Avenue,

REV: 4/25/17

Hearing, Speech & Deaf Center

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