

# Alaska Interpreting Alliance, Inc.

Interpreting – Training – Consulting

PO Box 2088

Palmer, Alaska 99645-2088

Cell (907) 982-2751

Fax (907) 745-7446

TIN 37-1564254

## Agreement to Pay for Interpreting Services

Please complete and return by fax to: (907) 745-7446.

The signature below indicates that

\_\_\_\_\_  
(Please print name of authorized individual)  
of

\_\_\_\_\_  
(Please print name of company/ agency requesting services)  
has reviewed and will follow the billing policies and rate structure as stated in  
**Alaska Interpreting Alliance , Inc. POLICIES AND PROCEDURES**  
and agrees to submit payment for services rendered upon receipt of invoice. I also understand  
and accept that this form must be completed, signed and returned prior to scheduling of any  
interpreter(s) or before services will be rendered.

\_\_\_\_\_  
**Signature of Authorized Agent**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Name of Company / Agency**

\_\_\_\_\_  
**Billing Address**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Email address -**

**Phone - (     )**

**Fax (if any) - (     )**