American Council on Education

Consultant’s Certificate of Time Work

Finance Office Use Only

|  |  |
| --- | --- |
| **Batch Number**       | **Voucher Number**       |
| **Vendor Number**       | **Due Date**       |
| **Invoice Number**       | **Description**        |

#### To Be Completed by Consultant

I certify that I have worked       days/hours on behalf of the American Council on Education on the following dates:

 **Month(s)**   **Date(s)**

|  |  |
| --- | --- |
|  |  |
|  |  |
|  |  |

In connection with

Please send check to this address [ ]  Check if new address

**Please make check payable to:**

**Name:**

**Address:**

**City:**       **State:**       **Zip:**

##### Signature Date

# Please Note: We must have an address even if check is not to be mailed

Indicate description and provide appropriate backup. Only first 20 characters will print on financial reports

|  |
| --- |
|       |

[ ]  Consultant Contract Attached

[ ]  Contract on file Finance in Office

## To Be Completed By ACE

$       $       $

Consulting Rate Per day/hour rate Days/Hours worked =

### Account Project Amount

|  |  |  |
| --- | --- | --- |
|       |       |        |
|       |       |        |
|       |       |        |

 **Total $**

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Authorized Approval Date