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 $**

==================

     

Authorized Approval Date