



I have carefully reviewed, understand, and agree to the terms and conditions contained in the Partners Interpreting LLC's "Service Agreement" and policies as outlined within Partners Interpreting webpage (www.partnersinterpreting.com). These policies including the terms stated therein relating to payment for, and cancellations of requested services, also including any Terms setting forth terms for speci c services CLIENT plans to use. I understand and agree that providing my assent to this Agreement by electronic means shall have the same legal effect as my handwritten signature executing this Agreement in hard copy form. CLIENT understands and agrees that all interpreting services provided to us during the duration of this Agreement shall be supplied according to these terms, and any changes in terms which may occasionally occur, of which we will be given prior notice. I am authorized to enter this Agreement on behalf of this organization and to authorize payment for the services to be provided pursuant to this Agreement.

Organization Name: City of Everett - Everett Municipal Court

Authorized Representative:

Cassie Franklin, Mayor

Title: Mayor

Phone #: 425-257-7112

Email: CFranklin@everettwa.gov

Date: 12/29/2023

APPROVED AS TO FORM
OFFICE OF THE CITY ATTORNEY



ATTEST - Ashleigh Scott
OFFICE OF THE CITY CLERK

Account Notes(Internal use only):



List the authorized users for your account below. Individuals can update pro le (contact info, address, etc.) online. If there are multiple sites/locations/departments requesting services, contact us to assist in updating the account.

Account Information

Account Name: Everett Municipal Court

Account Address: 3028 Wetmore Everett WA 98201

BILLING INFORMATION

Billing Contact: Sharon Whittaker

Billing Address: 3028 Wetmore Everett WA 98201

Job Title: Court Administrator

Phone Number: 425-257-7052

Email Address: SWhittaker@everettwa.gov

municipalcourt@everettwa.gov

Invoices will be sent electronically within 7 business days.

Request information(date, time, service) will be included.

Additional information is always available on our customer online portal. To protect privacy and for HIPAA compliance, Deaf consumer information is not included on invoices.

- If your organization requires a PO, please provide this information for your account
- Remittance mailing address is listed below
- Electronic remittance should be sent to accounting@partnersinterpreting.com



PRIMARY REQUESTOR INFORMATION (REQUIRED)

Scheduling Contact: Andrea Reeff

Job Title: Asst Court Administrator

Phone Number: 425-257-7050

Email Address: AReeff@everettwa.gov

SECONDARY REQUESTOR INFORMATION(OPTIONAL)

Scheduling Contact: Sharon Whittaker

Job Title: Court Administrator

Phone Number: 425-257-7052

Email Address: SWhittaker@everettwa.gov

ADDITIONAL INFORMATION



- 1. Will there be more than two points of contact requesting services for your organization? No
- 2. Will services be needed at more than one department or location? No
- 3. If 'YES', are invoices required 'per' location/department or can they be combined to a single invoice?
- **4.** Are there any forms or special protocols required by your organization for visitors/interpreters? For in-person hearings, check in with the Security Guard and front counter clerks.

Note: If any of the above apply to you, our team will reach out to help setup your online account accordingly.

Partners Interpreting LLC_12292023_SD

Final Audit Report 2023-12-29

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By: Ashleigh Scott (AScott@everettwa.gov)

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