Maria Galetta

Interpreter, Translator

To: Ms. Gaia Somasca,
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Date: June 4, 2009

Re.: Invoice for simultaneous interpreting service

Date	Time	Location + short description of assignment	Fee
Tue, May 26, '09	12.30pm – 1.30pm	Press Conference. Location: Istituto Italiano di Cultura	$900 [the full day fee will be applied as a courtesy, even if the work periods are not consecutive]
	7.00pm – 9.00pm	Cocktail with Commissioner Cocchi. Location: Plaza Hotel	
Wed, May 27, '09	9.30 am– 4.00pm	Health Conference - Simultaneous interpreting, working in a team with colleague Lilia Pino. Location: Plaza Hotel	$900
	7.00pm – 10.30pm	Opening Night Cocktail and Screenings Location: Anthology Film Archives	$500 [courtesy exception to standard fees]
Thu., May 28, '09	7.00pm – 11.00pm	Screenings, Q&A Location: Anthology Film Archives	$500 [courtesy exception to standard fees]
Sat., May 30, '09	8.30pm – 10.30pm	Screening, Q&A Location: Anthology Film Archives	$500 [minimum fee]
Sun, May 31, '09	4.30pm – 6.00pm	Screening, Q&A Location: Anthology Film Archives	$500 [minimum fee]
		Total	**$3800.00 by US check** **$3850.00 by international wire transfer**

Terms and Conditions Summary:

Standard Interpreting fee: $900. Covers up to 8 hours, during regular business hours, including breaks and lunch as per CLIENT's schedule. An overtime charge of $90 is applied to each one half hour thereafter. A 50% surcharge is applied for after-hours work.

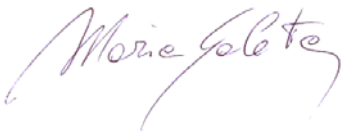
The Minimum fee of $500 covers up to 3 hours of work. Depending on the situation, this billing option might not be available.

Payment is due as per contracted terms:

- By check drawn on a US-based bank, to be received at your earliest convenience.
- By international wire transfer as soon as possible [since it was not sent in advance, as contract indicated]: Checking account n. 021001088 – 027134474. Account holder: Maria Galetta. Bank: HSBC, 1340 Third Avenue - New York, NY 10021. Swift: MRMDUS33. The wire transfer sending fee is to be paid by the sender. A fee of $50 will be added to the total due in order to cover the receiving bank fee.

Respectfully submitted by:

SSN: 038-58-1116



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