Authentication Request Form

| Destination Country | |
|--|--|
| Date: | |
| Name: | |
| Company Name: | |
| Telephone: | |
| E-mail: | |
| Address: | |
| Total Number of Documents | |
| Include a prepaid airway bill using: | DHL FedEx USP Regular US Mail |
| Return Address: | |
| You will pay using | Billing (companies only) Credit Card Money Order Company Check |
| Diagona fill and print this form than include it | |

Please fill and print this form then include it with your package. If you have any questions, contact us on: ca@usapostille.com