

Authentication Request Form

Destination Country

Date:

Contact Person:

Company Name:

Telephone:

E-mail

Address:

Origin State

Documents Type

- Corporate
- Federal
- Personal
- Commercial

No. of Documents

Return Address:

You will pay using

- Billing (companies only)
- Credit Card
- Money Order
- Company Check

Notes:

Please include this form with your package, along with your documents, your payment, and a prepaid Airway bill to send the documents back to you.

You may include an international Airway bill if the return address is outside the United States

**If you have any questions, contact us on:
ca@usapostille.com**