

# United States Apostilles

# Authentication /Apostille Request Form

633 West 5<sup>th</sup> Street **California**  
Suite 2800  
Los Angeles, CA 90071  
877-313-8585

Office Use:

## AUTHENTICATION / APOSTILLE REQUEST

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Country in which the document will be used - (example: China, Mexico, or Spain):

### Delivery Method Requested:

- Pick up  Prepaid Addressed Envelope  USPS Priority/Express \$19.99  FedEx (US) \$35.00  
 International FedEx (\$95 Mexico, \$120 Western Europe, \$130 China/S. Korea, \$150 S. America)  
 Personal Account: FedEx/UPS/DHL/ Acct No. \_\_\_\_\_

### Fees\* (Per Document)

- Birth Certificate: \$100  Marriage Certification: \$100  Death Certificate: \$100  
 Divorce Decree: \$200  Power of Attorney: \$200  Notarized Documents: \$200  
 Transcripts, Diplomas: \$200  Translations: \$80  MD Verification: \$100.00

Your Signature: **X** \_\_\_\_\_ Date: \_\_\_\_\_

(Your signature indicates you have read, understood and agree to all the terms and conditions of services)

Make Check or Money Order Payable to **United States Apostilles** and mail to:

United States Apostilles  
633 West 5<sup>th</sup> Street, Suite 2800  
Los Angeles, CA 90071

For Payments via Credit Card (9% credit card fee will be added):

Card Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_ / \_\_\_\_\_ CSC: \_\_\_\_\_  
MM / YY  
Name on Card: \_\_\_\_\_  
Billing Address: \_\_\_\_\_ City: \_\_\_\_\_  
State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Contact Number: \_\_\_\_\_ Email: \_\_\_\_\_

Total:\$ \_\_\_\_\_ By signing below, I the authorized cardholder, agree to and authorize **United States Apostilles** to charge my credit card the amount as indicated in the "Total Amount to be Charged" field for the services to be rendered. An additional 9% credit card processing fee will be added.

Cardholder Signature: **X** \_\_\_\_\_