(All Other States: AK, AZ, AR, CO, CT, DE, FL, GA, HI, ID, IL, IN, IA, KS, KY, LA, ME, MD, MA, MI, MN, MS, MO, MT, NE, NV, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA, RI, SC, SD, TN, TX, UT, VT, VA, WA, WV, WI, WY)

Oxnard SOS Apostilles
300 E Esplanade Drive,
9th Floor
Oxnard, CA 93036
877-777-0875

A ostille Certi i ate o Authenti ation e uest

lease rint or t e Su it this or ith our do u ents

Countr e uesting the A ostille *(Required)*: _____

Requestor's Name: _____

Name of Firm/Organization *(If applicable)*: _____

Address: _____

Number and Street *City* *State/Region* *Zip Code*

Daytime telephone number: _____ Email address: _____

T e o eturn ailer n losed: *(You must enclose one of the following if documents are to be returned to you by mail.)*

- ○ FedEx (US ONLY) 1-2 days $44.88
- ○ FedEx Ground 3-5 days $26.88

○ **International FedEx :** pick the country
- ○ $125 Mexico, ○ $143 Western Europe, ○ $161 China/S. Korea, ○ $170 S. America)

For Department Use Only

Transaction # _____ Cash Receipt # _____ Date: _____

Fees (Per Document)-(*Please Check off the desire services*):

- ☐ Birth Certificate: $332.88
- ☐ Marriage Certification: $332.88
- ☐ Divorce Decree: $332.88
- ☐ Single Status Affidavit: $332.88
- ☐ Translation **LA** $ 143.88 / Pg _____
- ☐ Transcripts, Diplomas: $332.88
- ☐ Power of Attorney: $332.88
- ☐ Affidavits: $333.88
- ☐ Copies | Scans: $1 x pg # _____
- ☐ Notarized Signature: $26.88 x # _____
- ☐ Death Certificate: $332.88
- ☐ Notarized Documents: $332.88
- ☐ Certificate of Naturalization: $404.88
  FBI Background Check: $404.88
- ☐ Translation **PLUS**: $ 107.88 x Page # ___

Your Signature: _____ Date: _____

Your signature indicates you have read, understood and agree to all the terms and conditions of service. ALL SALES FINAL

a e Cashier Che or one Order a a le to SOS A OST LL S LLC and ail to:

O nard SOS A ostilles
300 E Esplanade Drive, 9th Floor
Oxnard, CA 93036

or o a ent n losed or Authori ed: **Payment by Credit and Debit Card is added an additional 9% to the total amount; I Accept the terms and condition, all sales are final.**

Name on card: _____ City: _____ State: _____

Card Number: _____ ip Code: _____ Phone Number: _____

Expiration Date: _____ (MM/YYYY) C C: _____ ip Code: _____ Email address: _____

Billing Address: _____

TOTAL: $_____

Credit Card Authorization and Ackno ledgment of Terms: By signing belo , the undersigned cardholder (Cardholder) expressly authorizes Do nto n Los Angeles Notary Public, LLC (Company) to charge the credit card provided for payment in the total amount specified. This total includes the cost of services rendered plus a 9% convenience fee for credit card processing. Cardholder ackno ledges and agrees to the follo ing terms: All sales are final. No refunds, cancellations, or chargebacks are permitted unless other ise required by California la . Cancellation Policy: In the event of a cancellation, a fee equal to 2 % of the total service amount or $7 .00 hichever is greater ill apply. Chargebacks: If a chargeback is initiated ithout first attempting resolution ith the Company, a $ .00 chargeback fee ill be added to the balance o ed. Dispute Resolution: Cardholder agrees to make a good faith effort to resolve any disputes directly ith the Company prior to contacting their bank or initiating a chargeback. By signing belo , the Cardholder confirms they are an authorized user of the credit card provided and accepts full responsibility for all charges incurred under these terms.

Cardholder's Signature: _____ **Date:** _____

INSTRUCTIONS FOR FILLING OUT THE FORM

1. Please make sure that the documents you are submitting are originals, especially civil records such as: birth, marriage, death or court records. If you are not sure if your document is original, you can send us a photo of your document by text to **(213) 245-6580 / (213) 290-7133.**

2. In the contact information, please write your name, not the name of the person appearing on the document.

3. Please indicate the country in which your document will be used.

4. Select the required delivery method, either pick up the document or one of the other available delivery options.

5. Select the services you require.

6. Sign and date.

7. The authorized methods of payment are: check, money order and credit or debit card. If you are paying by credit or debit card, please note that there is an additional 9% fee that must be added to the total. Please enter your credit card information on the form.

If you have any questions or need assistance, please contact us at the phone number listed on the form.

INSTRUCCIONES PARA RELLENAR EL FORMULARIO

1. Por favor, asegúrese de que los documentos que presenta son originales, especialmente los registros civiles como: nacimiento, matrimonio, defunción o registros judiciales. Si no está seguro de que su documento es original, puede enviarnos una foto de su documento por texto al **(213) 245-6580 / (213) 290-7133.**

2. En la información de contacto, escriba su nombre, no el nombre de la persona que aparece en el documento.

3. Indique el país en el que se utilizará su documento.

4. Seleccione el método de entrega requerido, ya sea levantar el documento o una de las otras opciones de envío disponibles.

5. Seleccione los servicios que necesita.

6. Firme y escriba la fecha.

7. Las formas de pago autorizadas son: cheque, giro postal y tarjeta de crédito o débito. Si paga con tarjeta de crédito o débito, tenga en cuenta que hay una tasa adicional del 9% que debe añadirse al total. Introduzca los datos de su tarjeta de crédito en el formulario.

Si tiene alguna pregunta o necesita ayuda, póngase en contacto con nosotros al número de teléfono que aparece en el formulario.