

DOWNTOWN LA APOSTILLE

■ AUTHENTICATION / APOSTILLE REQUEST FORM

Office Use

515 South Flower Street
Floor 19th
Los Angeles, CA 90071
323-834-2483
www.downtownlaapostille.com

First Name : Last Name :
Address :
City : State : Zip Code :
Phone : Email :
Country in which the document will be used - (example: China, Mexico, or Spain) :

Delivery Method Requested:

☐ Pick Up ☐ FEDEX - GROUND 21.88 (3-5 BUSINESS DAYS)
☐ Prepaid Addressed Envelope ☐ FedEx (US) \$44.88
☐ International FedEx (___ \$105 Mexico, ___ \$140 Western Europe, ___ \$150 China/S. Korea, ___ \$170 S. America)

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

☐ Birth Certificate: \$206 ☐ Marriage Certification: \$206 ☐ Death Certificate: \$206
☐ Divorce Decree: \$276 ☐ Power of Attorney: \$276 ☐ Notarized Documents: \$276
☐ Transcripts, Diplomas: \$276 ☐ Affidavits: \$276 ☐ Certificate of Naturalization: \$404.88
☐ Notarized Sig | Certification \$26.88 X ___ ☐ SINGLE STATUS AFFIDAVIT ☐ FBI - CRIMINAL RECORD: \$404.88
☐ MD Signature Verification: \$100 ☐ Translations PLUS: \$125 Page# ___
☐ Translations OTHER: \$145/Pg # ___

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

****Attached or Authorized Payment Method:**** Payment by credit or debit card is subject to an additional ****9%**** charge on the total amount. By proceeding with the payment, the customer agrees to the ****terms and conditions**** set forth. ****All sales are final and non-refundable.****

Card Number : Expiration Date : / CSC :
MM / YY
Name on Card : City : Zip Code :
Billing Address : State : Phone :
Total Amount to be Charged : \$ Email :

Credit Card Authorization and Terms Acknowledgment: By signing below, the cardholder ("Cardholder") expressly authorizes Downtown Los Angeles Notary Public, LLC ("Company") to charge the total amount specified to the provided credit card. This amount includes the cost of services rendered plus a 9% convenience fee for credit card processing. The Cardholder acknowledges and agrees to the following terms: All sales are final. No refunds, cancellations, or chargebacks are permitted unless required by California law. Cancellation Policy: In the event of cancellation, a fee equivalent to 25% of the total service amount or \$75.00 USD, whichever is greater, will apply. Chargebacks: If a chargeback is initiated without first attempting to resolve the matter directly with the Company, a \$55.00 USD chargeback fee will be added to the outstanding balance. Dispute Resolution: The Cardholder agrees to make a good-faith effort to resolve any dispute directly with the Company before contacting their bank or initiating a chargeback. By signing below, the Cardholder confirms that they are an authorized user of the provided credit card and accept full responsibility for all charges incurred under these terms.

Cardholder's Signature: _____ Date: _____