SOS Apostilles (CA) 11801 Pierce Street, Suite 200			Office Use:					
Riverside, CA 9250	,							
888-778-1656			A		7			
Name: Address:	Apostille Request Form							
City:		State:	Z	ip:				
Phone:		Email:						
Country Reques	sting the Apost	ille? (examp	les: China, Me	exico, or s	<mark>Spain):</mark>			
Return to client – _ Pick Up _ Prepaid A								
International FedEx (_		-					ica)	
Personal Account: Fe	edEx/UPS/DH	L/ Acct No:]	nclude a self-a	addressed	label & envelo	ppe.		
Sees* (per docum	ent) - (Pleas	se Check o	ff the desir	e servic	es):			
Birth Certificate: \$						ate: \$156		
Divorce Decree: \$2	226 _ I	Power of At	torney: \$226	_ N	Notarized Doc	uments: \$	226	
Transcripts, Diplor	mas: \$226 _	_ Affidavits:	\$226	_C	ertificate of N	aturalizat	ion: \$250	5
Medical Doctors Sig	nature Verifica	aiton \$100	_ Notarized	Signature	: \$25 x			
Regular Translatio		-			ount): \$ 85 X F ervice with tra	-	-	
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Your Sign			read, understood				service)	
Your Sign	(Your signature ind	dicates you have		and agree to	o an the terms and o		service)	
	(Your signature ind	k or Money	Order Paya SOS Ap 1801 Pierce S Riverside,	able to S oostilles street, Sui	SOS Apostill te 200			
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Payment by credit and d	(Your signature ind	k or Money	v Order Paya SOS Ap 1801 Pierce S Riverside, 888-77	able to S postilles treet, Sui CA 9250 '8-1656 nount; I acc	SOS Apostill te 200 05 cept the terms and iration Date:	e and ma conditions, a	il to:	final.**
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