Riverside SOS Apostilles

11801 Pierce St. Suite 200
Riverside, CA 92505
888-778-1656

Apostille/Certificate of Authentication Request

Please print or type. Submit this form with your documents.

Country Requesting the Apostille? *(Required)*: _____

Requestor's Name: _____

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

Address: _____

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

Daytime telephone number: _____ Email address: _____

Type of Return Mailer Enclosed: *(You must enclose one of the following if documents are to be returned to you by mail.)*

- ○ FedEx 3-5 days (US) $26.88
- ○ FedEx 1-2 days $44.88
- ○ International FedEx (○ $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 document/s required an apostille*):

- ☐ Birth Certificate: $170.88
- ☐ Transcripts, Diplomas: $260.88
- ☐ Divorce Decree: $260.88
- ☐ Notarized Signature: $26.88
- ☐ Translation OTHER $ 143.88 X Pg # __
- ☐ Marriage Certification: $170.88
- ☐ Power of Attorney: $260.88
- ☐ Affidavits, Single Status: $260.88
- ☐ Copies | Scans: $1 x pg #
- ☐ Medical Signature Verification (MD): $107
- ☐ Death Certificate: $170.88
- ☐ Notarized Documents: $260.88
- ☐ Certificate of Naturalization:$404.88
- ☐ FBI Background Check: $404.88
- ☐ Translation PLUS: $107.88 X Pg# __

Your Signature: _____ Date: _____

By signing, you acknowledge that you have read, understood, and agree to all the terms and conditions of service.

Make Cashier Check or Money Order Payable to SOS APOSTILLES and mail to:

Riverside SOS Apostilles
11801 Pierce Street
Suite 200
Riverside, CA 92505

****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.****

Name as it appears on card: _____ Phone No: _____

Billing Address: _____ City: _____ **State:** _____ Zip Code: _____

Card Number: _____ **Expiration Date:** _____ **CSC:** _____
MM/YY

Total: $ _____

Card Payment Authorization and Acknowledgment of Terms: By signing below, the undersigned cardholder ("Cardholder") expressly authorizes Downtown Los Angeles Notary Public, LLC ("Company") to charge the credit, debit, or other payment card provided for the total amount specified. This total includes the cost of services rendered plus a 9% convenience fee for card processing. Cardholder acknowledges and agrees to the following terms: All sales are final. No refunds, cancellations, or chargebacks are permitted unless otherwise required by California law. Cancellation Policy: If services are canceled after payment is submitted, a cancellation fee of 25% of the total service amount or $75.00—whichever is greater— will apply. Chargebacks: If a chargeback is initiated without first attempting to resolve the matter directly with the Company, an additional $55.00 chargeback fee will be added to the amount owed. Dispute Resolution: Cardholder agrees to make a good faith effort to resolve any concerns or disputes directly with the Company before contacting the card issuer or initiating a chargeback. By signing below, the Cardholder confirms they are an authorized user of the payment card provided (Visa, Mastercard, American Express, Discover, debit, or any other) and accept full responsibility for all charges incurred under these terms.

Cardholder 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.