



Empowering Seamless Global Trade and Travel

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Document(s) Authentication/Legalization Form

*Please make a copy of this complete form for your records and enclose the original in an envelope along with your documents to be processed and mail to the address above.

Full Name: _____

Company Name (if applicable): _____

Country where documents are to be used: _____

(Please list all countries if more than one)

Number of documents to be processed: _____

Indicate if Embassy Consular services are needed: _____

US Department of State Authentication needed? (check one) YES: _____ **NO:** _____

Scan and email document(s) upon completion? *additional fees apply YES: _____ **NO:** _____

Date when documents are needed: _____

Contact Information & Return Address

(Please add return address if different from contact information)

Name: _____ **Signature Required:** _____ Y _____ N

Address: _____

City: _____ **State:** _____ **Zip:** _____

Email Address: _____

Work Phone: _____ **Cell Phone:** _____

Sign _____ **Date** _____

*By signing this form, I grant Visas and Authentications' designee the right, on my behalf, to execute the documents that are necessary and appropriate to secure the desired processing.

Name on Card: _____

Billing Address: _____

Credit Card Type: Visa Mastercard Discover AmEx

Credit Card #: _____

Expiration Date: _____

Card Identification Number: (last 3 digits located on the back of the credit card)

I authorize **Visas and Authentication (VAV)** to charge the above card for charges related to VAV Service Fees, Embassy and/or Department of State Agency Fees and shipping costs (if applicable)*. I agree to pay for this purchase in accordance with the issuing bank cardholder agreement.

Cardholder – Please Sign and Date

Signature: _____ **Date:** _____