



Global Apostille
3855 Holcomb Bridge Rd. Suite 300
Norcross, GA 30092
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E-mail: gapostille@gmail.com
www.GlobalApostille.us

APOSTILLE/AUTHENTICATION REQUEST FORM

Information about you

Your last name:
First name:
Company name (if you represent a business):

Your address

House Nr. and Street Name: Apt. #
City: State/Province: Zip/Postal Code: Country:
Email address: Telephone:

Shipping details – for requests by mail

(We use FedEx in the U.S. If you indicate a PO Box, then we will use USPS).

Same as the mailing address above? Yes or No, then indicate below

Address Type: Residential Business

Name of recipient:
House Nr. and Street Name: Apt. #
City: State/Province: Zip/Postal Code:
Country: Telephone:

Check this box if a signature is required to receive the documents. If you don't check, the courier may leave the package at your door (Global Apostille will not be responsible for the documents if left and lost*)

*For shipping within the USA only (additional fee \$10)

Information about your documents

Country where the document will be used:
Document type: Number of Documents:
I am requesting: Apostille Authentication Legalization Other _____

If you are not sure which service you need, please indicate the country where the document will be used and we will determine the correct process.

Processing type: Standard processing Rush processing (additional charge) * depending of the State

Optional services (must be selected at the time of order):

Free scan of Apostille page only Email scan of the completed document before return shipping \$20

Estimated international shipping cost: Total Cost:

I acknowledge that I provided correct information, I have read and agree to Terms and Conditions on the Global Apostille's website.

Date: Signature:



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Payment Information

Please choose your payment option:



Money Order



Western Union



Cashier's, Personal
or Business check



PayPal

(add a 3.5% fee)

Bank Transfer

(add \$25)



Credit
or Debit Card
(add a 3.5% fee)



Zelle

Make Check or Money Order payable to: Global Apostille

Name on the credit card:

If business card, company name:

Credit card number:

CVV

Expiration date (mm/yyyy):

(on your bank statement the charge will appear from Multichoice Group, Inc)

Credit or Debit Card billing address:

Same as the mailing address above?

Yes

or

No, then indicate address below

House Nr. and Street Name:

City:

State:

Zip/Postal Code

Email address:

Telephone:

I,

(your name), hereby authorize

Global Apostille to charge my account in the amount of \$

to process apostille
and/or authentication requests for my documents.

I understand that this payment is non-refundable. The refund will only be issued if Global Apostille is unable to obtain an apostille or if I cancel my request in writing (by fax or email) before Global Apostille begins processing my documents.

Signature of person authorizing payment:

Date: (mm/dd/yyyy)

REQUIRED DOCUMENTS CHECKLIST

To start the apostilling process, we have to receive from you:

Completed Order Form

Original Document(s)

Photocopy of passport or U.S. driver's license

Letter of Authorization (if required for legalization)

Payment information

Mail all documents to:

GLOBAL APOSTILLE

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