

USA DOCUMENT SUBMISSION FORM

Please print out and enclose this form with the submission of your publicly recordable documents.

| | DATE OF MAILING | | YOUR ORDER NUMBER | |
|---|-----------------|----------------|----------------------------|--|
| | | | | |
| | | | | |
| | YOUR NAME | | YOUR PHONE NUMBER | |
| | | | | |
| | | | | |
| YOUR EMAIL | | | | |
| | | | | |
| | | | | |
| | YOUR ENCLOSURES | | | |
| # | DOCUMENT TYPE | STATE OF ISSUE | COUNTRY FOR AUTHENTICATION | |
| 1 | | | | |
| 2 | | | | |
| | | | | |
| 3 | | | | |
| 4 | | | | |
| 5 | | | | |
| 3 | | | | |
| 6 | | | | |
| | | | | |
| COMMENTS, QUESTIONS, CONCERNS, OBSERVATIONS | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

| DOCUMENT DELIVERY ADDRESS | DETAILS FOR COURIER |
|--|--|
| AUTHENTICATE MY DOCS 1914 E 6TH STREET #6902 AUSTIN, TX 78762-2033 UNITED STATES OF AMERICA | Recipient telephone: +1 512 765 4105 ext. 113 Email notifications to: documents@authenticatemydocs.com |