

AUTHENTICATION REQUEST FORM

Sender's Name: _____

Company's Name: _____

Address: _____

Daytime telephone number: _____

Email address: _____

Country in which documents will be used: _____

Make sure that all documents are properly notarized or certified

Number of documents: _____ x \$10.00 (adoptions) = _____ Total due

Number of documents: _____ x \$20.00 (all others) = _____ Total due

Make payable to: Secretary of State Check _____ Money Order _____

____ Visa Credit card number: _____
____ Mastercard ****State Fee/Credit Card Users \$5.00**
____ American Express Expiration date: _____
____ Discover

Type of return mailer enclosed:

- _____ Self-addressed first class envelope with postage
- _____ Self-addressed U.S. Postal Service Priority or Express with postage
- _____ Self-addressed carrier label (FedEx, UPS, DHL) with account number

Submitting overnight delivery supplies **does not** guarantee overnight processing. Allow two (2) to three (3) business days for documents to be processed by our office. If you need immediate service, please call for additional information at 225.922.0330.

SEND COMPLETED FORM WITH PAYMENT AND ALL DOCUMENTS TO:

Secretary of State
Commissions Division
8585 Archives Ave.
Baton Rouge, LA 70809