

**AUTHORIZATION NOTE: Please complete in BLUE INK!!!**

I, \_\_\_\_\_ authorize Washington Passport and Visa Service to submit and receive upon completion, my passport request.

My Date of Birth is: mm\_\_\_\_\_/dd\_\_\_\_\_/yr\_\_\_\_\_.

My Date of Departure from the US is: \_\_\_\_\_.

SIGNATURE: \_\_\_\_\_.

**\*Attention: The above "Authorization" Note MUST be completed by ALL applicants!  
This authorization note allows our staff to pick up the completed since the Client is NOT here in person.**