

SharpLink Services -Document Authentication Request form

Document Authentication Document Type (Circle one): Personal Corporate Legal Number of Documents: Document state of Origin: For use in what Country? (Countries) **Billing & Contact Information** Company Name: _____ Street Address: City: Zip code: Phone Number: _____ Email: _____ **Return Shipping Method** -Pre-Paid Airbill Included -USPS Express Mail (\$35.00) -DHL (overseas deliveries only)- Contact our office for pricing. -Fedex Acct # (We will only use this number for your transaction(s) **Return Shipping Address** (If different from the Address above)

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