



SharpLink Services –Document Authentication Request form

Document Authentication

Document Type: ___ Personal ___ Legal ___ Corporate

Number of Documents: _____

Document state of Origin: _____

For use in what Country (Countries)? _____

Billing & Contact Information

Name: _____

Company Name: _____

Street Address: _____

City: _____ State: _____ Zip code: _____

Phone Number: _____ Email: _____

Return Shipping Method

_____ -Pre-Paid Airbill Included _____ -FedEx Acct # (Only for this transaction)

_____ -FedEx Priority Overnight (\$55) _____ -FedEx Standard Overnight (\$45)

_____ -FedEx (overseas)- Contact our office for pricing.

_____ -USPS Express Mail (\$40) _____ -USPS Priority Mail (\$20)

Return Shipping Address (If different from the Address above)

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