



The Visa and Document Company

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Passport Authorization Form

Washington Passport Agency
1111 19th Street NW
Washington, DC 20036

Dear Sir or Madam:

I, _____ authorize _____
(to be filled in by Washington Express Visa)

of Washington Express Visa Services to drop off and pick up my new/renewed passport.

Date of Birth: _____

Date of Departure: _____

Signature*

Date

* By signing this form, I grant Washington Express' designee the right, on my behalf, to execute the documents that are necessary and appropriate to secure the desired processing.