Speedy Passport & Visa 2324 SOUTH CARLISLE STREET PHILADELPHIA, PA 19145

Letter of Authorization

Please carefully read the information below before completing this Letter of Authorization.

An individual's person information cannot be released by the U.S. government to another party

	U.S. passport agency cannot discuss the details of your passport our written consent.
I authorize the mp agency and pick up the passp further documentation and/application, and I authorize the requests for further docume application. I want the passes	pany stated be very submit my passport application to a passport of some a very some and some agency on my behalf. For agency of disclose to be company listed below any requests for or information at that may arise in connection with my passport the company of sport agency to contact me rectly should a sign arise with my necession matters other than the company of the contact me rectly should a sign arise with my necession matters other than the contact me rectly should a sign arise with my necession matters other than the contact me rectly should a sign arise with my necession matters other than the contact me rectly should a sign arise with my necession matters other than the contact me rectly should a sign arise with my necession matters.
	Applicant Information
guardian	below may ONLY be filled out by the applicant, parent, legal, or person legally acting in loco parentis)
Applicant Name:	(Last Name, First Name, Middle Name)
	(Last Ivame, Prist Ivame, whome Ivame)
Applicant Phone No:	Date:
(Area Code-	XXX-XXXX) (MM/DD/YYYY)
Courier Company Name: _MUST	PRINT SPEEDY PASSPORT & VISA HERE
	(enter name from top of page)
Applicant Signature:	
(If the applicant is under the age of parentis must sign)	16 the parent(s),legal guardian(s), or person legally acting in loco

SPEEDY PASSPORT & VISA

2423 S Carlisle St., Phila., PA 19145

Letter of Authorization

Please carefully read the information below before completing this Letter of Authorization.

An individual's personal information <u>cannot</u> be released by the U.S. government to another party without the written consent of the individual under the provisions of the Privacy Act of 1974 (5 USC 552a). As a result, an employee at a U.S. passport agency cannot discuss the details of your passport application with a third party without your written consent.

Please check all that	apply:		
	orize the company stated below to ick up the passport from a U.S. pa	submit my passport application to a passport agency on my behalf.	t
further docum	nentation and/or information that t	ose to the company listed below any requests that may arise in connection with my passport pond to such requests under my direction.	
requests for f application. passport appl	further documentation and/or information and/or information and the passport agency to contain the passport agency to contai	o disclose to the company listed below any mation that may arise with my passport act me directly should an issue arise with my r than the date on which the passport will be	7
	Applicant Info	ormation_	
(Note: All of the	information below may ONLY	be filled out by the applicant, parent, lega	1
(4.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1	guardian, or person legally		
Applicant Name:			
Applicant Name	(Last Name, First	Name, Middle Name)	
Applicant Phone No.	(Asso Code VVV VVVV)	Date:(MM/DD/YYYY)	
	(Area Code-AAA-AAAA)		
Courier Company N	ame:		
Applicant Signature:			
(If the applicant is un	nder the age of 16 the parent(s), leg	gal guardian(s), or person legally acting in loc	20
parentis must sign)			

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Please check a	all that apply:			
	I authorize the company stated below a y and pick up the passport from a U.S. p	to submit my passport application to a passport passport agency on my behalf.		
	r documentation and/or information tha	close to the company listed below any requests for t that may arise in connection with my passport espond to such requests under my direction.		
I do not authorize the passport agency to disclose to the company listed below any requests for further documentation and/or information that may arise with my passport application. I want the passport agency to contact me directly should an issue arise with my passport application that concerns matters other than the date on which the passport will be ready for pick-up from the passport agency.				
	Applicant In	formation		
(Note: All		Y be filled out by the applicant, parent, legal		
(Ivote. All	guardian, or person legally			
	guardian, or person legan;	y acting in 1000 parentis)		
Applicant Nar	me:	st Name, Middle Name)		
	(Last Name, Fir	st Name, Middle Name)		
Applicant Pho	one No:	Date:		
11	one No: (Area Code-XXX-XXXX)	(MM/DD/YYYY)		
Courier Comp	pany Name:			
Applicant Sig	enature:			
11	,	<u> </u>		
		egal guardian(s), or person legally acting in loco		
parentis must	sign)			