

Monday - Friday  
9:00 a.m. - 5:00 p.m.  
(312) 372-2703

Passport, Visa &  
Legalization Service  
fax (312) 372-2715

PERRY INTERNATIONAL  
100 W. Monroe St., Suite 502  
Chicago, IL 60603  
www.perryvisa.com

### Order Form for Passport

Referred By \_\_\_\_\_

Departure date from the United States is \_\_\_\_\_

Countries traveling to \_\_\_\_\_

Number of passports requested \_\_\_\_\_

Names \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_ (Optional) Will pay the \$20 fee to register this trip, as explained in the instructions

In an emergency the embassy should contact client at what e-mail \_\_\_\_\_

Contact name if Perry International has questions \_\_\_\_\_

Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_

Complete at least one address and phone number even if payment is enclosed

Address to send invoice to: (if different)

Address to return documents to: (No P.O. Boxes)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Attn: \_\_\_\_\_

Attn: \_\_\_\_\_

Phone: \_\_\_\_\_

Phone: \_\_\_\_\_

If paying by credit card you do not need to send a deposit

Credit Card # \_\_\_\_\_ ( Amex , Diners , Mastercard , or Visa )

Expiration date: \_\_\_\_

Signature of card holder: \_\_\_\_\_