



VIP SERVICES

2012 Louisiana Street
Houston, Texas 77002
713-659-8472 1-800-856-8472 Fax 713-659-3767
Website: www.vippassports.com Email: info@vippassports.com

WORK ORDER REQUEST FORM

(RETURN THIS FORM WITH EACH REQUEST)

BILLING INFORMATION:

CONTACT: _____
COMPANY: _____
ADDRESS: _____

PHONE: _____
FAX: _____
EMAIL: _____

RETURN DOCUMENTS TO:

CONTACT: _____
COMPANY: _____
ADDRESS: _____

PHONE: _____
FAX: _____
EMAIL: _____

BILLING INSTRUCTIONS:

AMOUNT ENCLOSED FOR DEPOSIT: _____

YOUR COMPANY P.O. OR REF#: _____

AUTHORIZED AMOUNT TO CHARGE MY
CREDIT CARD: US\$ _____

CREDIT CARD INFORMATION:

TYPE OF CARD: _____
CARD #: _____
EXPIRATION DATE: _____

SIGNATURE OF CARD HOLDER
REQUIRED: _____

STATE WHERE THE BIRTH OCCURRED: _____

WILL YOU REQUIRE THE BIRTH CERTIFICATE TO BE LEGALIZED BY THE EMBASSY? IF
SO WHICH COUNTRY WILL THE DOCUMENT BE USED IN: _____

NUMBER OF ORIGINAL COPIES REQUIRED: _____

RETURN THE COMPLETED DOCUMENT BACK VIA: _____

DATE YOU NEED THE COMPLETED DOCUMENT: _____

PURPOSE FOR THE BIRTH CERTIFICATE: _____

SPECIAL INSTRUCTIONS: _____



VIP Services

2012 Louisiana Street
Houston, Texas 77002
713-659-8472 1-800-856-8472 - Fax 713-659-3767
Website: www.vippassports.com Email: info@vippassports.com

BIRTH CERTIFICATE INSTRUCTION SHEET

APPLICATION (S) REQUESTED FOR: BIRTH CERTIFICATE – DIST. OF COLUMBIA

DOCUMENTS REQUIRED:

VALID PASSPORT:	<u>N/A</u>	APPLICATION (S):	<u>1</u>
PASSPORT TYPE PHOTO (S):	<u>N/A</u>	ITINERARY/TICKET:	<u>N/A</u>
COMPANY LETTER:	<u>N/A</u>	DRIVERS LICENSE:	<u>1-COPY</u>
COPY OF INVITATION:	<u>N/A</u>	RELEASE LETTER:	<u>1-NOTARIZED</u>
OTHER:	_____		

PLEASE FORWARD THIS SHEET AND ALL THE ABOVE REQUIREMENTS TO THE ABOVE LISTED ADDRESS

FEES PER PERSON:

STATE FEE:	_____
VIP SERVICE FEE:	<u>\$75.00</u>
MONEY ORDER FEE:	<u>\$3.00</u>
OTHER FEES:	_____
*ADD RETURN DELIVERY:	_____
TOTAL: (NO PERSONAL CHECKS PLEASE)	_____

*FEDERAL EXPRESS FEES:

PRIORITY LETTER	\$29.00
2-DAY LETTER	\$23.50
3-DAY LETTER	\$19.50
SATURDAY LETTER	\$41.50

**VISA PROCESSING TIME

REGULAR PROCESSING TIME: 2 WEEKS

COMMENTS: IF YOU HAVE ANY QUESTIONS, PLEASE CONTACT OUR OFFICE.
LONG FORM BIRTH CERTIFICATES ARE \$23.00 EACH
COMPUTER SHORT-FORM BIRTH CERTIFICATES ARE \$18.00 EACH.

REVISED: 12-17-08 JEN

BIRTH CERTIFICATE REQUEST

STATE CENTER FOR HEALTH STATISTICS ADMINISTRATION

FOR DISTRICT OF COLUMBIA OCCURRENCES ONLY

CERTIFICATE HOLDER'S NAME: _____

BIRTH DATE: ____/____/____

SEX: MALE FEMALE

HOSPITAL(IF KNOWN): _____

CITY: _____ WASHINGTON, D.C.

FATHER'S NAME: _____

(FIRST)

(MIDDLE)

(LAST)

MOTHER'S NAME: _____

(FIRST)

(MIDDLE)

(LAST)

NUMBER OF ORIGINAL CERTIFICATE FORMS REQUESTED: _____

(\$23.00 EACH)

NUMBER OF COMPUTER CERTIFICATE SHORT FORMS REQUESTED: _____

(\$18.00 EACH)

TOTAL AMOUNT ENCLOSED:

RELATIONSHIP TO CERTIFICATE HOLDER: SELF MOTHER FATHER

OTHER: _____

SIGNATURE OF REQUESTOR: _____ DATE: _____

MAIL CERTIFICATE TO:

NAME: _____ ***PLEASE USE ATTACHED RETURN AIRBILL***

ADDRESS: _____ ***SEE ATTACHED AIRBILL***

CITY/STATE/ZIP: _____

DAY PHONE: _____ 713-659-8472

**IF RECORD IS NOT LOCATED A "Certificate of Search" WILL BE ISSUED.



VIP SERVICES

2012 Louisiana Street
Houston, Texas 77002

713-659-8472 1-800-856-8472 Fax 713-659-3767

Website: www.vippassports.com Email: info@vippassports.com

RELEASE LETTER

VITAL RECORDS OFFICE

I, _____, AUTHORIZE YOUR VITAL RECORDS OFFICE TO DISCUSS THE STATUS OF THE BIRTH CERTIFICATE FOR _____ WITH "**VIP SERVICES**" AS THEY WILL BE EXPEDITING MY SERVICE.

I AM THE:

- CHILD LISTED ON THE BIRTH CERTIFICATE
- BIOLOGICAL MOTHER LISTED ON BIRTH CERTIFICATE
- BIOLOGICAL FATHER LISTED ON BIRTH CERTIFICATE
- LEGAL REPRESENTATIVE OF THE CHILD/MOTHER/FATHER LISTED ON BIRTH CERTIFICATE
- OTHER: (SPECIFY/SHOW RELATIONSHIP) _____

SINCERELY,

SIGNATURE

NAME-PRINT

THIS SIGNATURE WAS WITNESSED BEFORE ME ON THIS _____ OF _____ 20____.

NOTARY SIGNATURE & SEAL