



# VIP SERVICES

2012 Louisiana Street  
Houston, Texas 77002  
713-659-8472 1-800-856-8472 Fax 713-659-3767  
Website: [www.vippassports.com](http://www.vippassports.com) Email: [info@vippassports.com](mailto: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](http://www.vippassports.com) Email: [info@vippassports.com](mailto:info@vippassports.com)

## BIRTH CERTIFICATE INSTRUCTION SHEET

APPLICATION (S) REQUESTED FOR: BIRTH CERTIFICATE-STATE OF ALASKA

### **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:	<u>***PLEASE SEE IMPORTANT NOTE BELOW***</u>		
	<u> </u>		
	<u> </u>		

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

### **FEES PER PERSON:**

STATE FEE:	<u>\$15.00</u>
VIP SERVICE FEE:	<u>\$75.00</u>
MONEY ORDER FEE:	<u>\$3.00</u>
** SPECIAL HANDLING: (5-7 DAY RUSH)	<u> </u>
OTHER FEES: <u>FED EX TO ALASKA</u>	<u>\$41.31</u>
*ADD RETURN DELIVERY:	<u>\$41.31</u>
<b>TOTAL: (NO PERSONAL CHECKS PLEASE)</b>	<u> </u>

### **\*\*VISA PROCESSING TIME**

REGULAR PROCESSING TIME: 10-15 DAYS

\*\*PLEASE MARK THE APPROPRIATE BOX IF YOU NEED TO HAVE THE BIRTH CERTIFICATE ISSUED ON A RUSH PROCESS (\$20.00 SPECIAL HANDLING FEE).

COMMENTS:

ON THE APPLICATION, PLEASE ONLY COMPLETE THE QUESTIONS REGARDING THE INFORMATION FOR THE CHILD LISTED ON THE BIRTH CERTIFICATE AND HOW MANY COPIES YOU ARE REQUESTING. IF YOU HAVE ANY QUESTIONS, PLEASE CONTACT OUR OFFICE.

REVISED: 12-18-08 JEN

**STATE OF ALASKA  
BIRTH CERTIFICATE REQUEST FORM**

**REQUIRED INFORMATION**

First, Middle and Last Name of Child: \_\_\_\_\_  
(child's full first, full middle, and last name as it appears on the birth certificate)

Date of Birth: \_\_\_\_\_

City or Village of Birth (in Alaska only): \_\_\_\_\_, Alaska

Mother's First, Middle, and **Maiden Name**: \_\_\_\_\_  
(mother's full first, full middle, and maiden name as it appears on the birth certificate)

If Father Listed on Certificate;  
Father's First, Middle, & Last Name: \_\_\_\_\_  
(father's full first, full middle, and last name as it appears on the birth certificate)

Relationship to Child: \_\_\_\_\_  
(i.e. self, parent, legal guardian)

Signature of Person Requesting Record: \_\_\_\_\_  
(individual named on certificate [14 or older], legal guardian, or parent applicant)

**A COPY OF A GOVERNMENT-ISSUED PHOTO ID OF THE APPLICANT MUST ACCOMPANY THIS FORM.  
THE APPLICANT'S SIGNATURE BELOW THE COPY OF THE PHOTO ID IS ALSO REQUIRED.**

**ADDITIONAL SEARCH INFORMATION**

Name of Hospital of birth or Other Facility: \_\_\_\_\_

If unsure of birthday, date range of search: \_\_\_\_\_

Applicant's Full Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

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

\_\_\_\_\_ Standard Size Certificates @ \$20/each = \$ \_\_\_\_\_

\_\_\_\_\_ Wallet Size Certificates @ \$20/each = \$ \_\_\_\_\_

Ship by:              Regular    (No extra charge)

   Priority Mail (Add \$4.80)                      \$ \_\_\_\_\_

   Express (INCLUDED)                                      \$ \_\_\_\_\_

   DHL (No PO Box / Add \$16.50) \$ \_\_\_\_\_

   Payment by Credit Card (Add \$11.00) \$ \_\_\_\_\_

**TOTAL  
CHARGE \$ \_\_\_\_\_**

Please note:  
There is a  
\$30.00 NSF fee  
for returned  
checks.



# VIP SERVICES

2012 Louisiana Street  
Houston, Texas 77002

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

Website: [www.vippassports.com](http://www.vippassports.com) Email: [info@vippassports.com](mailto: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