

REQUEST FOR CONSULAR REPORT OF BIRTH ABROAD

(must be completed & signed)

Record request generated by www.VitalRec.com

INSTRUCTIONS

- 1. Print, complete & sign both the Request for Consular Report of Birth Abroad (this form) and the Consular Vital Record Search Request.
- 2. Make a copy of your current, valid driver's license or your government-issued photo-identification card (front and back if necessary).
 - Enlarge photocopies by approximately 200%, and lighten by 2 shades, to ensure a clear and legible copy.
 - Ensure your full name, address, signature, license or identification number, and expiration date are clearly visible on the photocopy.
- Have the Consular Vital Record Search Request form notarized by a Certified Notary Public.
- 4. Send ALL documents (Request for Consular Report of Birth Abroad, Consular Vital Record Search Request, and your photocopied ID) to the following address (express courier shipping is recommended for expedited service and tracking purposes):

PURCHASER INFORMATION

Passport Services
VitalChek Network Inc.
PO Box 222130
El Paso, TX 79913

Full Name Shown on Certificate:				
Full Name of Purchaser:	Relationship to person named on Certificate			
Contact Phone:	Contact Email:			

I authorize VitalChek Network Inc. to obtain a copy of my Consular Report of Birth Abroad for delivery to me:

Signature: Date:

ORDER INFORMATION

Certificate: Consular Report of Birth Abroad (FS-240)		Fees are per person, and multiple copies are available
State Department Certificate Fee:	\$50.00	
Shipping & Handling Fee:	\$65.89	Includes Express Courier Service for Domestic or International delivery
Additional Copies: # of copies for total of	<u>\$</u>	\$50.00 each
TOTAL:	\$	This amount will be charged to your credit card

PAYMENT INFORMATION

Credit Card:	○ Visa	○ MasterCard	O American Express	○ Discover		
Card Number:				Expires:		
Cardholder's Name (print):						
Cardholder's Signa	ature:			Date:		
Cardholder's Addr	ess:					

IMPORTANT NOTES:

- Additional information may be required by the State Department for the fulfillment of this order. Please review the Consular Vital Record Search Request form for details.
- VitalChek is not responsible for delays in processing due to inaccurate or incomplete applications, declined payments, issues surrounding proof of identity, third party delays, or delays due to request volume and workload of State Department personnel.
- Post Office Boxes, APO or FPO addresses are not acceptable for delivery address information. A signature will be required at delivery.
- All sales are final, and all forms must bear the authentic signature of the applicant or legal guardian.



CONSULAR VITAL RECORD SEARCH REQUEST

(must be completed, signed & notarized)

Record request generated by www.VitalRec.com

INSTRUCTIONS

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- 2. Make a copy of your current, valid driver's license or your government-issued photo-identification card (front and back if necessary).
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- 4. Send ALL documents (Request for Consular Report of Birth Abroad, Consular Vital Record Search Request, and your photocopied ID) to the following address (*express courier shipping is recommended for expedited service and tracking purposes*):

Passport Services
VitalChek Network Inc.
PO Box 222130
El Paso, TX 79913

	DOCUMEN	IT INFORMAT	ION	
☐ FS-240 – Consular Report of Birth Abr		tynically accental	ble as legal proof of birth and U.S. citizenship.	
This form indicates a birth occurred overs	seas, and is t	typicany acceptai	ble as legal proof of birth and o.o. ditizensing.	
# of copies \$50.00 for 1st copy	, \$50.00 for	each additional	сору	
	CEDTI EL CA	TE I NEODMAI	TLON	
Request Date:	Purpose of Request:			
Full Name on Certificate:				
If Adopted, Full Name After Adoption:				
Date of Birth:	Date of Birth: Country of Birth		1:	
Father's Full Name:				
Mother's Full Name (Maiden Last Name, bet	fore married):			
Country of Father's Birth:		Country of I	Country of Mother's Birth:	
AUTHORI	ZATION &	SHIPPINGIN	NFORMATION	
Signature of Certificate Holder (or Parent	:/Guardian of	f Certificate Hold	er under age 18):	
Shipping Address: (no PO Boxes, APO or FPO addresses)				
City:		State / Province:		
Country:			Zip / Postal Code:	
	NOTADY		- N	
		INFORMATIO		
Subscribed and Sworn to or Affirr	ned Before Me	This Day of	f, 20	
Notary Signature:			Commission Expires:	
Notary Seal:				