

U.S. Department of State

OMB CONTROL NO. 1405-0129 OMB EXPIRATION DATE: 08-31-2016 ESTIMATED BURDEN: 20 Minutes

STATEMENT OF CONSENT: ISSUANCE OF A U.S. PASSPORT TO A MINOR UNDER AGE 16

Attention: Read WARNING and FORM INSTRUCTIONS on page 1

1. MIN	IOR'S NAME						
Last		First		Middle			
2. MIN	IOR'S DATE OF BIRTH (mm/c	ld/yyyy)					
	ATEMENT OF CONSENT To be at the time the applying parent or					ition when not	
Ι,	Print Name (non-applying parent)			, give my consent to the issuance of a United States passport to my minor child named on this application.			
1910	Street Address (non-applying pared	nt) Apartr	nent	City	State	Zip Code	
To the	Area Code Telephone Nur	nber		E-mail Addr	ess		
	STOP! YOU MU OATH: I declare under penalt						
	Signature of Non-Applying Parent or Guardian			Date (mm/dd/yyyy)			
6/12/1989	NOTE: A clear photocopy of the fro	ont and back of the ident	ification you prese	nted to the notary is	required with this	form.	
4. ST/	ATEMENT OF CONSENT NOT	ARIZATION					
Name	of Notary						
rvarno		Print Name	(Notary Public)		1 1 1 1 1 1 1 1		
Locat	on		1564 6				
		City, State			NOTARY SEAL	(
Comn	nission Expires	Date (mm/dd/yyy	(V)			- 2	
14.0							
	cation Presented -Applying Parent or Driver's l an:	License Passport	Military ID	Other (specify)			
ID Nun	nber:	*	Place of Issu	ue:	,		
	Issue Date (mm/dd/yyyy):	erra sinaelee! <u>European likkonaas</u>	Expiration Date	e (mm/dd/yyyy):			
perforr	By signing this document, I certify ning my notarial duties, that I am no have properly verified the identity of opy.	t related to the above af	fiant, that I have po	ersonally witnessed	him/her sign this	document, and	
	ture of Notary			Date of Notariza	tion		
Oigila	talo of Notary			_ TTOTATIZA	Date (m	nm/dd/yyyy)	