

U.S. Department of State PASSPORT APPLICATION TRANSMITTAL				Acceptance Facility Number		Date		☐ ROUTINE Or ☐ EXPEDITE						
ENTRY NUMBER	Name of Facility (City, State and Zip Code)							Facility Telephone Number (Include Area Code)				No Fee	Execution Fee \$35	Clerk's Initials
	Applicant's Name (Please Print or Type)	Date of Birth (mm/dd/yyyy)	Telephone Number (Include Area Code)	Passport Book		Passport Card		1-2 Day Delivery Service Fee (of Book) \$19.53	Expedite Fee \$60	File Search Fee \$150	Total Fees to Dept. of State \$			
				Minor Fee \$100	Adult Fee \$130	Minor Fee \$15	Adult Fee \$30							
ex.	<i>Claudia M. Thompson</i>	<i>02/08/1954</i>	<i>(540) 555-7235</i>		x		x	x	x		\$239.53		x	
1.														
2.														
3.														
4.														
5.														
6.														
7.														
Agent's Stamp or Seal			Agent's Printed Name:									Number of Applications Included on Transmittal:		
			Agent's Signature:											
			Transmittal Tracking or Delivery Confirmation Number:											

THIS TRANSMITTAL IS TO BE INCLUDED IN THE SAME ENVELOPE AS THE APPLICATIONS LISTED ABOVE WHEN MAILING.
DO NOT SEND MORE THAN SEVEN (7) APPLICATIONS PER ENVELOPE. PLEASE RETAIN A COPY OF THIS TRANSMITTAL FOR YOUR RECORDS.