

PAYMENT FORM

Please fill in this form to pay by credit card

We accept Discover/Novus, Visa, Mastercard, and American Express

Credit Card Number (16 digits):

Expiration Date (month/year): _____

Full Name: _____

I authorize the U.S. Consulate General of the United States of America to charge the above account for the passport services provided.

Signature: _____

Date: _____

*****Passport Renewal by Mail: US \$75**

*****Added Pages:** no charge

Updated February 1, 2008