

PASSPORT AUTHORIZATION LETTER

EMBASSY OF CAMEROON
24349 Massachusetts Avenue N.W.
Washington, D.C. 20008

To Whom It May Concern:

Travel Document Express and its representative are hereby designated to submit this passport application and obtain from your office this completed passport.

Please select one of the following:

_____ **I authorize the Embassy of Cameroon to discuss the status of this application with a representative of Travel Document Express.**

_____ **I want the Embassy of Cameroon to contact me directly should a problem arise with this passport application which concerns documents other than the release date of this passport.**

Name of Applicant: _____

Date of Birth: _____

Departure Date: _____

Country of destination: _____

Applicant's signature: _____
or Guardian (if under 18)

Date of Application: _____
month/ day / year

Note to Cameroon Embassy: