



EMBASSY LETTER REQUEST

DATE: _____

NAME: _____

AKA'S: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

TELEPHONE: _____

DOB: _____ SSN: _____ - _____ - _____ GENDER: M or F

How long have you resided in Nevada? _____

How long have you resided in Washoe County? _____

Circle one: Pick-Up OR Mail

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FOR OFFICE USE ONLY

WCSO: _____

CONTACT: _____