

(ELS)

EXCHANGE LANGUAGE SERVICES Inc.

## 221 Queen Street, Kingston, Ontario, K7K 1B4

## **TRANSLATION REQUEST FORM**

**REQUEST #:** 

We thank you for dealing with ELS and we recommend having a copy from your passport, Canadian Driver's License or permanent residence card that showed the needed <u>correct spelling</u> of the names and addresses.

Please send it to: te6116@gmail.com.

Name:		)ate:	/ _	/	/ 202
Telephone:	Email (	optional):			
Address:					
Document Language:	Number of Pages:				
Document Type: please check the Box.					
□ Passport.					
□ Driver's License.					
□ Marriage Certificate.					
□ Birth Certificate.					
□ Immunization Card.					
□ Medical Report.					
□ Educational Degree.					
□ Others: please specify:					
Date of submitting the original documents fo	or translation	:/	/	/ 202	:
Expected Date of receiving the Translation		/	<i>'</i>	/ 202	
Translation Fees: \$	_ HST : \$	7	otal: \$_		

If you have any questions concerning this assignment, please contact:

Exchange Language services (ELS) Inc. (Corp. #: 998644-8)

Email: <u>te6116@gmail.com</u> Tel: 613-929-5916