

APPLICATION FORM FOR LEGALIZATION
FORMULAIRE POUR DEMANDE DE LEGALISATION

1. Name of Organization/Person _____

Nom de l'organization / personne

2. The purpose of the document to be legalized

But du document a légaliser

3. Address: _____

4. Tel No. _____

No. Tel

1. Number of Documents _____

Nombre de documents

6. Type of document _____

Type de document

7. Prior legalization date _____

Date de legalization anterieure _____

8. Date _____ 9. Signature _____

በክፍሉ የሚገኙ

የተሰጠው ወሳኔ _____

የመረጃው ቁጥር _____

የደረሰኝ ቁጥር _____

የተከፈለው ገንዘብ _____

ቀን _____

ወሳኔ የሰጠው ባለሥልጣን ፊርማ _____