

OFFICE OF THE LIEUTENANT GOVERNOR

Ke Ke'ena O Ka Hope Kia'āina State Capitol, Fifth Floor Honolulu, Hawaii 96813 Phone: (808) 586-0255 email: ltgov.contact@hawaii.gov www.hawaii.gov/ltgov

SYLVIA LUKE LIEUTENANT GOVERNOR

Application for Apostille or Certification of Documents

STATEMENT OF LEGAL EFFECT OF APOSTILLE

Apostilles certify only that a document has been signed by, and bears the seal and stamp of, a duly commissioned Notary Public of the State of Hawaii. An Apostille does not validate the substance, contents, and/or legal effect of the document, nor that the document has been approved and/or endorsed by the Lieutenant Governor, the State of Hawaii, or any court of competent jurisdiction.

			Mail*·	*Please include a
				self-addressed, stamped envelope
Email Address (if any):		Pnone #:		— stamped envelope
Place in	ucluda \$1 faa (cash, cashiar's ch	heck, or money order) for each	document	
	, ,	• • •		
1. Please identify the do	ocument that you wish to have	e an Apostille/Certification aff	ixed to:	
1.	2.	3.		
2. What foreign country	y(s) will the document be pres	sented to:		
3. For what purpose is	the document being used:			
		NT & CERTIFICATION		
		RSTAND THE ABOVE STATEM		
		DER PENALTY OF LAW THAT HAT THE REQUESTED APOST		
	PRESENTATION TO THE DES	STINATION COUNTRY NAME		
	OTHER	PURPOSE.		
Signature		Date		
Print Name				
DO NOT COMPLETE THI	S SECTION (FOR COMPLETIO	N BY THE OFFICE OF THE LIEU	JTENANT GO	OVERNOR)
Apostille Number	Commen	nts:		
Taposeme rumber	Commen			
Receipt Number				