认证接谈笔录 Declaration Form of Legalization

申请人姓名			出生日期	T
(Applicant		性别(Gender)	(Date of	
Name)		12/4/ (0017201)	birth)	
Nаше <i>)</i>				
住址			电话	
			(mobile	
(Address)			Phone)	
ムハケロガチ	. १३. मर्च घ न्त	_		
身份证号码或护照号码				
(Identity (Card or passport			
No.)				
需要说明的其他问题(Declaration):				
	_			_
声明:我所提供的情况属实,并愿对此承担法律责任。				
I hereby declare that all the information above is true and correct, for which I shall bear all the legal				
responsibilities.				
l coponication	5.	由语人效	夕 (Cianatura).	
	申请人签名(Signature):			
	44 4 11 1	ntu	H ()	- /
	签名日其		ar) 月(month)	日 (day)
接谈人签字(Signature of the official):				