

ITALIAN CITIZENSHIP ASSISTANCE PROGRAM
3295 N. Arlington Heights Rd., Ste 114 Arlington Heights, IL 60004
Toll Free: 888-604-1970 Email info@icapbridging2worlds.com

ITALIAN CITIZENSHIP FOR SPOUSES
(Please Print)

Name: _____

Address: _____

Phone: _____ email: _____

PLEASE SELECT FROM ANY OF OUR SERVICES INCLUDE:

Procurement of Italian Records for your Application

- Marriage (Estratto per Riassunto dell' Atto Matrimonio)
- Certificato Generale Del Cassellario Giudiziale; if applicable, see Guidelines
- Certificato Dei Carichi Pendenti; if applicable,see guidelines

Professional Translation of the following American Documents:

- Birth Certificate
- Marriage License and Certificate if married in the U.S.
- Certificate of Residence
- State and County Police Clearance
- FBI Clearance

Procurement of US Vital Records and Apostille

- **Obtain your Certified US Birth and Marriage Certificate**
- **Apostille for US Vital Records, Police/ County Clearance, Certificate of Residence**
- **Professional Translation**
- **Complimentary Consultation Prior to Consulate Appointment**

Marriage Certificate (please print):

Name of Spouse: _____ Date of Marriage: _____

Place of Marriage: _____
(City/State or Town/Province)

Italian Comune/Town: _____
(Where Registered in Italy)

ICAP SPOUSAL ORDER FORM

Check all items that you are ordering:

Italian Documents:

- _____ Marriage Certificate from Italian Comune
\$85.00
- _____ Certificato del Cassellario Guidiziale (if needed)
\$95.00
- _____ Certificato Dei Carichi Pendenti (if needed)
\$95.00

Professional Translation *(check all documents enclosed legible send photocopies)*

- _____ Birth Certificate
\$60.00
- _____ Marriage License and Certificate, if married in the US
\$60.00 per page
- _____ Certificate of Residence
\$65.00
- _____ Police Clearance
\$70.00 per page
- _____ F.B.I Clearance
\$70.00 per page
- _____ Notarized Certificate of Translation if Required by your Consulate
\$55.00

U.S. Vital Record Procurement: \$75.00 per document, plus the cost of the certificate

Print or type information the following information; you can photocopy the order form if needed.

Birth Certificate:

- Child's Full Name: _____ City, State, County of birth: _____
- Date of birth: _____
- Father's Name: _____ Mother's Name (include maiden): _____

Apostille Services: \$125.00 base rate, 60.00 for each additional Apostille from the same State

Name on Certificate: _____

Type of Certificate: _____

State Of Issuance: _____

Apostille Services: \$125.00 base rate, 60.00 for each additional Apostille from the same State

Name on Certificate: _____

Type of Certificate: _____

State Of Issuance: _____

Apostille Services: \$125.00 base rate, 60.00 for each additional Apostille from the same State

Name on Certificate: _____

Type of Certificate: _____

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Apostille Services: \$125.00 base rate, 60.00 for each additional Apostille from the same State

Name on Certificate: _____

Type of Certificate: _____

State Of Issuance: _____

Total Amount Enclosed: _____

PAYMENT METHOD: Personal check, money orders, and Visa, MasterCard, Amex

___ Personal Check or Money Order made payable to "ICAP" enclosed with order

___ Credit Card Payment: Type of Card _____ Card# _____

Expiration: _____ Address of Cardholder: _____

MAIL THIS FORM AND PAYMENT TO:

**Italian Citizenship Assistance Program
3295 N. Arlington Hts. Rd., # 114
Arlington Heights, IL 60004**