



OFFICE OF THE LIEUTENANT GOVERNOR

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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.

Name: _____
Address: _____ Pick-Up: _____ Mail*: _____ *Please include a self-addressed, stamped envelope.
City, State, Zip Code: _____ Phone #: _____
Email Address (if any): _____

Please include \$1 fee (cash, cashier's check, or money order) for each document.

1. Please identify the document(s) that you wish to have an Apostille/Certification affixed

A. _____ B. _____ C. _____

2. What foreign country(s) will the document(s) be presented to:

3. For what purpose is the document being used:

ACKNOWLEDGEMENT & CERTIFICATION

I ACKNOWLEDGE THAT I HAVE READ AND UNDERSTAND THE ABOVE STATEMENT OF LEGAL EFFECT OF APOSTILLE. I ALSO HEREBY CERTIFY UNDER PENALTY OF LAW THAT THE INFORMATION PROVIDED HEREIN IS TRUE AND CORRECT, AND THAT THE REQUESTED APOSTILLE OR CERTIFICATION SHALL BE USED FOR PRESENTATION TO THE DESTINATION COUNTRY NAMED ABOVE, AND FOR NO OTHER PURPOSE.

Signature

Date

Print Name

DO NOT COMPLETE THIS SECTION (FOR COMPLETION BY THE OFFICE OF THE LIEUTENANT GOVERNOR)

Apostille Number _____

Comments: _____

Receipt Number _____