

PASSPORT



United States of America

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LAST NAME: _____

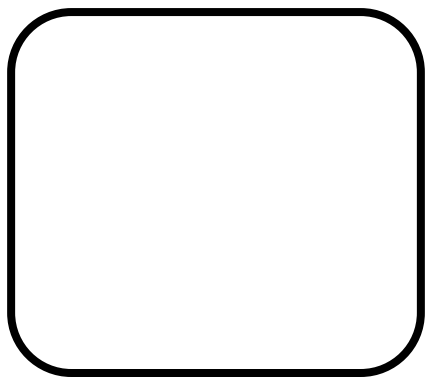
FIRST NAME: _____

MALE / FEMALE

COUNTRY OF BIRTH: _____

DATE OF BIRTH: __/__/____

PHOTO



DATE ISSUED: __/__/____

DATE OF EXPIRATION: __/__/____

LAST NAME: _____

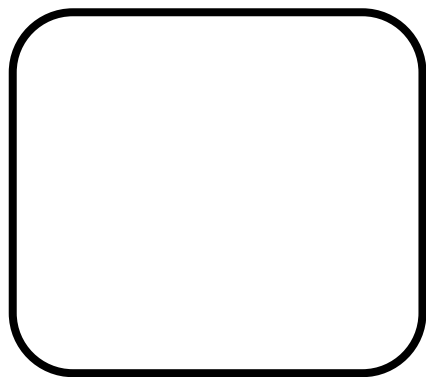
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