

Date: \_\_\_\_\_

Service Request Number: \_\_\_\_\_

I am applying for an Apostille for use in the Country of \_\_\_\_\_  
(Name of Country)

**SUBMITTER'S INFORMATION**

Customer

Organization Name: JOHN CABOT UNIVERSITY

Attention: \_\_\_\_\_

Return Address: VIA DELLA LUNGARA, 233

City-State-Zip: ROME, 00165 Country ITALY

Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

Account Number: 90112956

The original documents are being sent to Delaware Secretary of State, Division of Corporations.  
Please contact [DOSDOC\\_CSR@delaware.gov](mailto:DOSDOC_CSR@delaware.gov)

Best Regards,