

WIC 4/11 10

U.S. PASSPORT RENEWAL APPLICATION FOR ELIGIBLE INDIVIDUALS

OMB APPROVAL NO. 1485-0020
EXPIRATION DATE: 12-31-2013
ESTIMATED BURDEN: 45 MIN

Please Print Legibly Using Black Ink Only

Attention: Read WARNING on page 1 of instructions
Please select the document(s) for which you are applying:
 U.S. Passport Book U.S. Passport Card Both
 2" x 2" Passport Book (Standard) 5" x 7" Passport Book (Non-Standard)
Note: The 5" x 7" passport book is for those who frequently travel abroad during the passport validity period and is recommended for applicants who have previously required the service of this passport.



1. Name Last: MAXWELL
First: GHISLAINE Middle: NOELLE
 D O DP DOTS Code
End # Exp.

2. Date of Birth (mm/dd/yyyy): [Redacted]
3. Sex: M F
4. Place of Birth (City & State if in the U.S., or City & Country as it is presently known): MAISONS LAFFITTE FRANCE

5. Social Security Number: [Redacted]
6. Email Address (e.g. my_email@domain.com): [Redacted]
7. Primary Contact Phone Number: [Redacted]

8. Mailing Address: Line 1: Street/RFD#, P.O. Box, or URB. [Redacted]
Address Line 2: County, Suite, Unit, Building, Floor, or Care Of or Attention if applicable (e.g. In Care Of - Jane Doe, Apt # 100)
City: NEW YORK State: NY Zip Code: 10065 Country (if outside the United States):
9. List all other names you have used. (Examples: Birth Name, Maiden, Previous Marriage, Legal Name Change. Attach additional pages if needed)



10. Passport Book and/or Passport Card Information
Your name as listed on your most recent passport book and/or passport card
GHISLAINE NOELLE MAXWELL
Most recent passport book number: [Redacted] Issue date (mm/dd/yyyy): 12/04/2002
Most recent passport card number: [Redacted] Issue date (mm/dd/yyyy): [Redacted]

11. Name Change Information. Complete if name is different than last passport book or passport card
 Changed by Marriage (Place of Name Change: City/State) Date (mm/dd/yyyy)
 Changed by Court Order
Please submit a certified copy of your marriage certificate or court order to support your name change.

CONTINUE TO PAGE 2

YOU MUST SIGN AND DATE THE APPLICATION IN THE DESIGNATED AREA BELOW
I declare under penalty of perjury all of the following: 1) I am a citizen or non-citizen national of the United States and have not, since acquiring U.S. citizenship or nationality, renounced my U.S. citizenship or national status; 2) I am not currently serving in the armed forces of the United States; 3) the statements made on the application are true and correct; 4) I have not provided any false information or included false documents in support of this application; 5) the photograph is a true and accurate representation of me; 6) I have read and understood the warning on page one of the instructions to the application form.

[Redacted Signature] 4/09/12
Date

Marriage Certificate Date of Marriage/Place Issued
 Court Order Date Filed/Court
From: _____
To: _____
 Other
 Attached

For Issuing Office Only: Sk Fee \$110 Cd Fee \$600 Postage Other CK
* DS 82 B 12 2010 1 *

Prohibited

00005885-0775

Name of Applicant (Last, First & Middle)			Date of Birth (mm/dd/yyyy)	
MAXWELL, GHISLAINE NOELLE			12/25/1961	
12. Height	13. Hair Color	14. Eye Color	15. Occupation	16. Employer or School (if applicable)
5ft. 8in.	Brown	Brown	CONSULTANT	SELF EMPLOYED
17. Additional Contact Phone Numbers				
<input type="checkbox"/> Home <input type="checkbox"/> Cell		<input type="checkbox"/> Home <input type="checkbox"/> Cell		
<input type="checkbox"/> Work <input type="checkbox"/>		<input type="checkbox"/> Work <input type="checkbox"/>		
18. Permanent Address: If P.O. Box is listed under Mailing Address or if residence is different from Mailing Address				
Street/RFD # or URB (No P.O. Box)				Apartment/Unit
[REDACTED]				801
City		State	Zip Code	
[REDACTED]		FL	33139	
19. Emergency Contact - Provide the information of a person not traveling with you to be contacted in the event of an emergency.				
Name		Address: Street/RFD # or P.O. Box		Apartment/Unit
[REDACTED]		[REDACTED]		[REDACTED]
20. Travel Plans				
Date of Trip (mm/dd/yyyy)	Duration of Trip	Countries to be visited		
04/12/2012	2 WEEKS	FRANCE AF # 7		
<p>STOP! YOU HAVE COMPLETED YOUR APPLICATION BE SURE TO SIGN AND DATE PAGE ONE</p> <p>or Disclosure</p> <p>Prohibited</p>				
				 * DS 82 B 12 2010 2 *

0000885-0777

PASSPORT
 292 1st Avenue, Suite 204, New York, NY 10003
 Tel: (212) 261-2368 Fax: (212) 616-2268

Unauthorized

Letter of Authorization

To: The US Passport Office

Dear Sir/Madam:

Reproduction

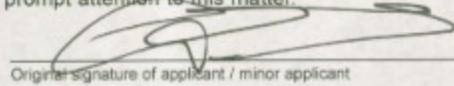
I, GHISLAINE MAXWELL hereby authorize

Passport Rush, LLC. to submit my passport and collect it when issued.

The following visas are required prior to my departure:

Date of birth: 12 / 25 / 1961

Thank you for your prompt attention to this matter.



Original signature of applicant / minor applicant

For my son/daughter

Prohibited

00005885-0778

U.S. PASSPORT RENEWAL APPLICATION FOR ELIGIBLE INDIVIDUALS

Please Print Legibly Using Black Ink Only

OMB APPROVAL NO. 1405-0020
EXPIRATION DATE: 12-31-2013
ESTIMATED BURDEN: 40 MIN

Attention: Read WARNING on page 1 of instructions
Please select the document(s) for which you are applying:

U.S. Passport Book U.S. Passport Card Both

28 Page Book (Standard) 52 Page Book (Non-Standard)

1. Name
 First: MAXWELL
 Middle: NOELLE
 Last: GHISLAINE

2. Date of Birth (mm/dd/yyyy): 12 25 1961

3. Sex: M F

4. Place of Birth (City & State if in the U.S., or City & Country as it is presently known.): MAISONS LAFFITTE, FRANCE

5. Social Security Number: [REDACTED]

6. Email Address (e.g. my_email@domain.com): [REDACTED]

7. Primary Contact Phone Number: [REDACTED]

8. Mailing Address

Department, Company, Suite, Unit, Building, Floor, In Care Of or Attention if applicable: [REDACTED]

City: NEW YORK State: NY Zip Code: 10065

Country, or State: [REDACTED]

9. List all other names you have used. (Examples: Birth Name, Maiden, Previous Marriage, Legal Name Change. Attach additional copies of supporting documents.)

A. [REDACTED] B. [REDACTED]

10. Passport Book and/or Passport Card Information

Your name as listed on your most recent passport book and/or passport card: GHISLAINE NOELLE MAXWELL

Most recent passport book number: [REDACTED] Issue date (mm/dd/yyyy): 12/04/2009

Most recent passport card number: [REDACTED] Issue date (mm/dd/yyyy): [REDACTED]

11. Name Change Information Complete if name is different than last passport book or passport card

Changed by Marriage: Date (mm/dd/yyyy): [REDACTED]

Changed by Court Order: Date (mm/dd/yyyy): [REDACTED]

Please bring proof of your marriage certificate or court order to support your name change.

CONTINUE TO PAGE 2

YOU MUST SIGN AND DATE THE APPLICATION IN THE DESIGNATED AREA BELOW

I declare under penalty of perjury all of the following: 1) I am a citizen or non-citizen national of the United States and have not, since acquiring U.S. citizenship or nationality, performed any of the acts listed under "Acts or Conditions" on the reverse side of this application (unless explanatory statement is attached); 2) the statements made on the application are true and correct; 3) I have read and understood the warning on page one of the instructions to the application form.

Date: 4/09/12

FOR INFORMATION

Marriage Certificate Date of Marriage/Place Issued: [REDACTED]

Court Order Date Filed/Court: [REDACTED]

From: [REDACTED]

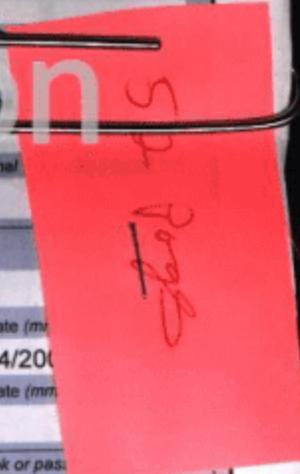
To: [REDACTED]

Other: [REDACTED]

Attached: [REDACTED]

For Issuing Office Only → Bk Fee: \$110 Cd Fee: \$6.00 Postage: [REDACTED] Other: CK

* DS 82 B 12 2010 1 *



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