

PROTECTED B / PROTÉGÉ B

Government of Canada



Gouvernement du Canada

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Case Note / Note sur le cas

08-LNGLS-2064512 United States Riess 12-Aug-2011 16:37

Category / Catégorie : Arrest / Detention

Status / Statut : Filed

Mission / HQ/AC : Los Angeles

Originator / Auteur : Dextraze

**Note No. /
N° de note :** 24

**Topic /
Sujet :** New application received
this day

Enclosed application received this day. DO likely sent packet before receiving my email advising of deficiencies with previous application.

Will contact DO on Monday to obtain status update.

LNGLS/Marie

Info:

Dextraze, Marie/Los Angeles; Pellijeff, Megan/PPSD

INFORMATION
PROTECTED

ADULT GENERAL PASSPORT APPLICATION

for Canadians 16 years of age or over (in Canada or in the USA)

WARNING to all applicants and guarantors – Any false or misleading statement on this form or relating to any document in support of this application, including concealment of any material fact, may lead to refusal or revocation of a passport and be grounds for criminal prosecution.

Failure to complete all the required sections of this form will result in your application being rejected.



1 Personal Information						
Surname (last name) Riess						
Given name(s) (see instruction No. 1) Richard						
Surname (last name) at birth (see instruction No. 1) NA			Former surname (former last name) (see instruction No. 1) NA		Date of travel ☐ Month ☐ Day ☒ Unknown	
If passport requested in spousal surname (last name), enter			Year of marriage		Surname (last name) of spouse (see instruction No. 1)	
Date of birth Year: 1973 Month: 11 Day: 24		Place of birth City: Ontario Country: USA Prov./Ter./State (if applicable): CA				
Sex ☐ Female ☒ Male	Marital status Married	Eye colour Brown	Hair colour Brown	Height 5' 5"	Weight 135 lbs	
Address of permanent residence 1705 E. Hanna Rd Eloy AZ 85131 Number Street Apartment P.O. Box City Prov./Ter./State Postal/Zip code						
Mailing address (if different from above) Number Street Apartment P.O. Box City Prov./Ter./State Postal/Zip code						
Daytime telephone number NA		Evening telephone number NA		Cell. number or email address (optional) NA		
DECLARATION – I solemnly declare that I am a Canadian citizen, that the photos enclosed are a true likeness of me and that all of the statements made in this application are true. I declare that I have read and understood the WARNING to all applicants and guarantors above.						
Date Year: Month: Day:		Signed at City: Province/Territory/State:				

2 Declaration of Guarantor (to be completed by the guarantor only if the applicant has completed and signed this application form)						
Surname (last name)			Given name(s)			
Date of birth Year: Month: Day:		Canadian passport number	Date of issue Year: Month: Day:		Date of expiry Year: Month: Day:	
Surname (last name) in passport, if different			Daytime telephone number ()		Evening telephone number ()	
Address of permanent residence Number Street Apartment City Province/Territory/State Postal/Zip code						
DECLARATION – I solemnly declare that I have known the applicant identified above personally for at least TWO (2) years. I have certified on the back of ONE (1) photo that the image is a true likeness of the applicant. If applicable, I have signed a copy of each document to support the applicant's identity confirming that I have seen the original(s). I declare that I have read and understood the WARNING to all applicants and guarantors above.			I have known the applicant for Number of years		Signature of guarantor	
			Date Year: Month: Day:		Signed at City: Province/Territory/State:	

Aussi disponible en français

PPTC 153 (10-04) M02

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Passport Canada
Passeport Canada

Canada

000102

3 Previous Canadian Passport				
• In the last FIVE (5) years, has a Canadian passport, Certificate of Identity or Travel Document been issued to you? ☒ No ☐ Yes (specify) Number				
		Date of issue Year	Month	Day
If yes, include it with your application.				
• Would you like the passport to be returned to you? ☐ No ☐ Yes				
• If the passport issued to you in the last FIVE (5) years has been lost, stolen, damaged, destroyed or is inaccessible, you must include with this application form a completed "Statutory Declaration" form PPTC 203, available from any Passport Canada service location in Canada, any Canadian government office in the USA or at www.passportcanada.gc.ca				

4 Proof of Canadian Citizenship				
A To be completed by ALL applicants. Did you acquire citizenship of another country before JANUARY 1, 1947?				
☒ No ☐ Yes (specify) By birth		Country		Effective date Year Month Day
		By naturalization		
B To be completed if you were born in Canada . Provide ONE (1) of the two documents listed below (no copies):				
☐ Birth certificate in Canada (see instruction No. 4)		Registration number		Date of issue
☐ Certificate of Canadian citizenship (see instruction No. 4)		Certificate number		Date of issue
C To be completed if you were born outside of Canada .				
1) Provide ONE (1) of the four documents listed below (no copies):				
☐ Certificate of Canadian citizenship (see instruction No. 4)		☐ Certificate of registration of birth abroad (issued by the Registrar of Canadian Citizenship)		
☐ Certificate of naturalization		☐ Certificate of retention of Canadian citizenship (issued before February 15, 1977)		
Certificate number		Date of issue		
2) To be completed if you were born outside of Canada between February 15, 1977 and April 16, 1981 inclusively . (You do not need to complete this section if you are presenting a certificate of Canadian citizenship issued after January 1, 2007.)				
a) Are you a naturalized Canadian? (i.e. Did you receive Canadian citizenship following immigration to Canada?)		☐ Yes - Go to section 5		☐ No - Continue to question b)
b) Was one of your parents born in Canada?		☐ Yes - Go to section 5		☐ No - Continue to c)
c) Complete and submit form PPTC 001 "Proof of Canadian Citizenship – Additional Information" which you can obtain at www.passportcanada.gc.ca or at any Passport Canada service location, participating Canada Post office, participating Service Canada Centre in Canada or any Canadian government office in the USA.				

5 Documents to Support Identity				
Provide the following information. Include signed copies (both sides) or original documents (see instruction No. 5).				
Type of document	Document number	Date of expiry (if applicable) Year Month Day	Name of bearer as it appears on the document	
Type of document	Document number	Date of expiry (if applicable) Year Month Day	Name of bearer as it appears on the document	

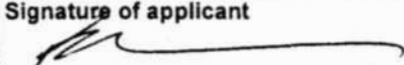
Declaration of Applicant				
DECLARATION – I solemnly declare that the statements made in this application are true.				
Signature of applicant 		Date Year Month Day 2011 3 1	Signed at City <u>Edmonton, AZ</u> Province/Territory/State	

6 Credit Card Information				
COMPLETE ONLY if you are not appearing in person and you wish to pay by credit card.				
☐ ☐ ☐		Name appearing on card		
Card number		Date of expiry Month Year		
AUTHORIZATION – I authorize Passport Canada to charge C\$ to my credit card.		Signature of cardholder		Date Year Month Day
FOR OFFICIAL USE ONLY Authorization number 				

7 Additional Personal Information					
A Addresses in the last TWO (2) years ☐ Same as current address. Addresses in the last TWO (2) years if different from current address. (If insufficient space, attach a separate sheet.) (Number, Street, Apartment, City, Province/Territory/State, Country)					
1. 3250 W Lower Buckeye Rd, Phoenix, AZ, US	From	Year	Month	To	Year
		2010	01		2011
					02
2. 1705 E. Hanna Rd, Eloy, AZ, US	From	Year	Month	To	Year
		2009	04		2010
					01
B Occupation in the last TWO (2) years (If insufficient space, attach a separate sheet. If you are, for example, a homemaker or are retired, indicate this in the "Employer/school or other" column.) In the last TWO (2) years, ☐ my employers were and/or ☐ I was attending educational institutions as follows:					
Employer/school or other	Address		Daytime phone	Nature of employment/studies	Date (From)
NA					Date (To)
NA					
NA					
C Mother's maiden name Provide your mother's surname (last name) at the time of her birth. NA					

8 References			
Provide the following information with respect to TWO (2) persons who are neither your relatives nor your guarantor and who have known you for at least TWO (2) years. They may be contacted to confirm your identity.			
1. Surname (last name)		Given name(s)	
NA		NA	
Relationship	Address (Number, Street, Apartment, City, Province/Territory/State, Country)		
NA	NA		
Daytime phone	Evening phone	Cell. number or email address (optional)	Has known me for
NA	NA	NA	NA
		State number of years	
2. Surname (last name)		Given name(s)	
NA		NA	
Relationship	Address (Number, Street, Apartment, City, Province/Territory/State, Country)		
NA	NA		
Daytime phone	Evening phone	Cell. number or email address (optional)	Has known me for
NA	NA	NA	NA
		State number of years	

9 Emergency Contact (optional)			
We recommend that you provide the name of someone who would not normally travel with you. This information is helpful if you have an accident or become ill while travelling outside of Canada.			
Surname (last name)		Given name(s)	
NA		NA	
Relationship to applicant	Daytime phone	Evening phone	Cell. number
NA	NA	NA	NA
Address			
Number NA Street Apartment City Prov./Ter./State Postal/Zip code			

Declaration of Applicant			
DECLARATION – I solemnly declare that the statements made in this application are true.			
Signature of applicant	Date	Signed at	
	Year 2011 Month 3 Day 1	City Eloy, AZ Province/Territory/State	

