



U.S. CONSULATE GENERAL SÃO PAULO

STOLEN AND LOST PASSPORT REPORT

Complete name - as written in your passport and visa

Grid for name entry

Date of Birth mm/dd/yyyy

Date of Birth input box

State of Birth

State of Birth input box

Country of Birth

Country of Birth input box

Stolen and/or Lost Passport Number:

Your passport was: Lost() Stolen () When ___/___/___(mm/dd/yyyy)

Where (city, state, country):

How and where did the loss or theft take place? Provide a brief statement about the incident:

Lines for incident statement

Please select the visa type located inside the stolen/lost passport:

B2 Tourism() B1/B2 Business and Tourism() L Work() H Work() Other(s) _____

Passport Nationality _____

Location where the visa was issued: São Paulo() Rio de Janeiro() Recife() Brasilia()

If Other, please list State/Country: _____

Visa Issuance Date ___/___/___ (mm/dd/yyyy) Visa Expiration Date ___/___/___(mm/dd/yyyy)

Father's name: _____

Mother's name: _____

Spouse's name: _____

Number of new passport : _____

Place and issuance date of new visa: _____

I, the undersigned, declare that if I subsequently recover my old passport containing my United States visa, I will not attempt to use it for travel.

Legal Signature

Place and Date