VISA SUPPORT FORM

Please complete this form and send it together with a copy the personal page of your passport to:

Mr. Sergey Astapov

E-mail: SergeyAstapov@dmvs.minatom.net or Fax No. +095 230 24 20

Full name (as it is in the Passport):	
Male/Female:	
Date of Birth:	
Place of Birth:	
Citizenship:	
Passport No:	_
Passport expiry date:	_
Name and address of your organization company/institute:	
Zip code:City:	Country:
Phone No:Fax no):
E-mail address:	
Official position:	
City in your country where you will apply fo Consulate):	r visa (nearest Russian
Cities in Russia which you would like to visi	t (maximum 6):
Length of stay in Russia:	
Please attach copy of personal page of your p	 passport.