



Notary Public Application
 Jesse White — Illinois Secretary of State

--

Enclose \$10 fee payable to Secretary of State. Return completed form to: Secretary of State Index Department, 111 E. Monroe, Springfield, IL 62756.

Last Name:		First Name:		Middle Name or Initial:	
Business Address (P.O. Box not acceptable):					
Street:		City:		State:	ZIP Code:
Name of Employer:			Driver's License or State Identification Card Number (attach a photocopy):		
Business Phone:		Date of Birth:	Applying for: <input type="checkbox"/> New Commission <input type="checkbox"/> Renewal of Commission		
				Current Expiration Date: _____ Commission Number: _____	
Email Address:		Home Phone:		County of Residence:	
Current Home Address (P.O. Box not acceptable):					
Street:		City:		State:	ZIP Code:
Has your name, address or county changed since your last commission? <input type="checkbox"/> Yes <input type="checkbox"/> No					
If, yes, give previous name, address and/or county: _____					

NOTARIAL OATH		State of Illinois, County of _____	
1. I am a U.S. citizen or an alien admitted for permanent residence.	2. I have been a resident of Illinois for at least 30 days.	3. I am age 18 or older.	4. I have never been convicted of a felony.
			5. I am able to read and write the English language.
			6. I have never had a notary public commission revoked.
I do solemnly affirm, under the penalty of perjury, that the answers to all statements on this application are true, complete and correct; that I have carefully read the notary law of the State of Illinois; and that if appointed and commissioned as a notary public, I will perform faithfully, to the best of my ability, all notarial acts in accordance with the law. Further, my signature below authorizes the Office of the Secretary of State to conduct a background verification to confirm the assertions and information provided herein.			
Printed Name as you want Commissioned: _____		AFFIX NOTARY SEAL HERE	
Signature as you want to be Commissioned: _____			
Notary Public Signature: _____			
Witnessed and Affirmed this _____ day of _____, 20 _____			

NOTARY PUBLIC BOND	
THIS BOND MUST BE WRITTEN BY A COMPANY QUALIFIED WITH THE ILLINOIS DEPARTMENT OF INSURANCE TO WRITE SURETY BONDS IN THE STATE OF ILLINOIS. The Office of the Secretary of State does not recommend any particular bonding or insurance company.	
Know all by these presents that we _____ as principal/applicant and _____ are held firmly bound unto the People of the State of Illinois, in the penal sum of FIVE THOUSAND DOLLARS (\$5,000), for the payment of which, well and truly to be made, we bind ourselves, our heirs, executors, administrators and assigns jointly and severally, firmly by these presents.	
THE CONDITION OF THE ABOVE OBLIGATION IS SUCH THAT, whereas, the above bound principal/applicant has applied for appointment by the Secretary of State of the State of Illinois as a Notary Public for a four-year term.	
Now, if said principal/applicant shall truly and faithfully perform and discharge the duties of said office of Notary Public, in all things according to law, then the above obligation to be null and void, otherwise to remain in full force and virtue in law. The term of this bond is from the effective date of the principals's/applicant's commission to the expiration date of the same.	
X _____ Signature of Principal/Notary Public Applicant	X _____ Signature of Authorized Representative of Surety Company
BOND NUMBER	AFFIX CORPORATE SEAL HERE

Instruction to complete the Illinois Notary Application

FAST APPROVAL



Return to: **AAN**

P.O. BOX 630601, Houston, Texas 77263

First & last name must match the name on your driver's license. Use of middle name is optional.

Your home address must match the address listed on your driver's license, unless you have updated it on the SOS website.

Your signature and your name must read the same. You can use "initial" as your first name on this section, but you cannot abbreviate or use a nickname. For example "John Doe" can apply as "J. Doe" and must sign as "J. Doe".

Notary Public Application			
Jesse White – Illinois Secretary of State			
Enclose \$10 fee payable to Secretary of State. Return completed form to: Secretary of State Index Department, 111 E. Monroe, Springfield, IL 62756.			
Last Name: DOE	First Name: JOHN	Middle Name or Initial: OPTIONAL	
Business Address (P.O. Box not acceptable): Street: N/A		City: N/A	State: N/A ZIP Code: N/A
Name of Employer: SELF-EMPLOYED OR N/A	Driver's License or State Identification Card Number (attach a photocopy):		
Business Phone: N/A	Date of Birth:	Applying for: <input type="checkbox"/> New Commission <input type="checkbox"/> Renewal of Commission	
Email Address:		Current Expiration Date: _____ Commission Number: _____	
Home Phone:		County of Residence:	
Current Home Address (P.O. Box not acceptable): Street:		City:	State: _____ ZIP Code: _____
Has your name, address or county changed since your last commission? <input type="checkbox"/> Yes <input type="checkbox"/> No			
If, yes, give previous name, address and/or county: _____			
NOTARIAL OATH			
State of Illinois, County of _____			
1. I am a U.S. citizen or an alien admitted for permanent residence. 2. I have been a resident of Illinois for at least 30 days. 3. I am age 18 or older. 4. I have never been convicted of a felony. 5. I am able to read and write the English language. 6. I have never had a notary public commission revoked.			
I do solemnly affirm, under the penalty of perjury, that the answers to all statements on this application are true, complete and correct; that I have carefully read the notary law of the State of Illinois; and that if appointed and commissioned as a notary public, I will perform faithfully, to the best of my ability, all notarial acts in accordance with the law. Further, my signature below authorizes the Office of the Secretary of State to conduct a background verification to confirm the assertions and information provided herein.			
Printed Name as you want Commissioned: J. DOE		AFFIX NOTARY SEAL HERE 	
Signature as you want to be Commissioned: <i>J. Doe Signature</i>			
Notary Public Signature: _____			
Witnessed and Affirmed this _____ day of _____, 20____			
NOTARY PUBLIC BOND			
THIS BOND MUST BE WRITTEN BY A COMPANY QUALIFIED WITH THE ILLINOIS DEPARTMENT OF INSURANCE TO WRITE SURETY BONDS IN THE STATE OF ILLINOIS. The Office of the Secretary of State does not recommend any particular bonding or insurance company.			
Know all by these presents that we _____ as principal/applicant and _____ are held firmly to bind the People of the State of Illinois, in the penal sum of FIVE THOUSAND DOLLARS (\$5,000), for the payment of which, well and truly to be made, we bind ourselves, our heirs, executors, administrators and assigns jointly and severally, firmly by these presents.			
THE CONDITION OF THE ABOVE OBLIGATION IS SUCH THAT, whereas, the above bound principal/applicant has applied for appointment by the Secretary of State of the State of Illinois as a Notary Public for a four-year term.			
Now, if said principal/applicant shall truly and faithfully perform and discharge the duties of said office of Notary Public, in all things according to law, then the above obligation shall be null and void, otherwise to remain in full force and virtue in law. The term of this bond is from the effective date of the principals's/applicant's commission to the expiration date of the same.			
X _____ Signature of Principal/Notary Public Applicant	X _____ Signature of Authorized Representative of Surety Company	BOND NUMBER	
AFFIX CORPORATE SEAL HERE		AFFIX CORPORATE SEAL HERE	

Do not leave any blank spaces. Write N/A if the field does not apply. For example write N/A if you are unemployed.

Attach a legible copy of your driver's license or state-issued ID. (The state will reject applications with an illegible copy of an ID)

Enter the county where you reside, not where you are employed.

This section, the "Notarial Oath", must be completed by a notary. Sign the section in front of a notary and return to AAN.

These sections, will be completed by the American Association of Notaries (AAN).



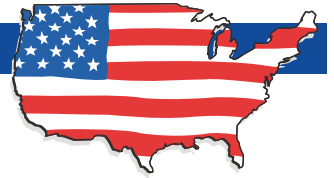
Bonds and errors and omissions insurance policies provided by this insurance agency, American Association of Notaries, Inc., are underwritten by Western Surety Company (established 1900).

American Association of Notaries is owned by Kal Tabbara, a licensed insurance agent in Illinois.

American Association of Notaries® • P.O. Box 630601, Houston, TX 77263
1-800-721-2663 • fax 1-800-721-2664 • www.illinoisnotary.com • sales@usnotaries.com



ORDER FORM (All States)



American Association of Notaries

8811 Westheimer, Suite 207, Houston, TX 77063

Phone Number 1-800-721-2663 Fax 1-800-721-2664

Office Hours: 9am - 5pm CST

3 Easy Ways To Order:

By Phone:
1-800-721-2663

Online:
www.usnotaries.com

By Mail:
American Association of Notaries
PO Box 630601 Houston, TX 77263

So that we may process your order promptly, please provide us with a copy of your notary commission certificate. **Use a work street address for faster delivery and tracking service.** For fastest service, order online or call your orders in. Most orders placed by noon CST during our normal business hours will be shipped on the next business day.

Name as it appears on your commission certificate*

County Name (If Applicable) _____

Commission or Appointment # _____

Commission expiration date (mm/dd/yyyy): _____

*New applicants: Enter your name as it appears on your notary application. Leave exp. date & comm. no. blank.

Shipping Address

Company Name _____

Address _____

City _____

State _____ Zip _____

Daytime Phone Number (_____) _____

Shipping Information: Your shipment contains valuable items. Please choose a work street address where someone will be available to sign for your delivery.

Form of Payment

Mail To: PO BOX 630601, Houston, TX 77263

Check enclosed payable to: **American Association of Notaries**
Check No. _____

Please charge my credit card account:



--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Expiration Date:

Customer Signature _____

Billing Address (Leave blank if same as shipping)

Email Address _____

AAN Membership/Account No. (if available) _____

Refund Policy: Requests for refunds on all incomplete orders must be in writing.

Type in any special instructions regarding shipping, stamp manufacturing, or other special needs

ITEM #	QUANTITY	PRODUCT DESCRIPTION (Include color choices for stamp ink and cases where applicable)	PRICE	TOTAL
		Illinois Notary Bond	\$30.00	
		Illinois Notary Errors & Omissions	Included	
		Notary Package	\$12.95	
		State Filing Fee	\$10.00	

- California notaries - Mail original "Certificate of Authorization" with your order.
- Oregon notaries - Mail/Fax a copy of the "Certificate of Authorization" with your order.
- AZ/GA/MO/MT/NV/OR/WA notaries - Mail/Fax a copy of your notary commission certificate.
- North Dakota notaries - Mail/Fax "Authorization to purchase notary public seal/stamp" form.
- Utah notaries - Mail/Fax "Certificate of Authority of Notary Public" form.



Please add an additional **\$6.00** for **UPS Ground** delivery.

Sub-total	\$	
USPS Shipping	\$	5.95
TOTAL	\$	