

Notary Public Application
Jesse White — Illinois Secretary of State

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Enclose \$10 fee payable to Secretary of State. Return con Last Name:		First Name:			Middle Name or Initial:						
Business Address (P.O. Box not acceptable): Street:	City:			Stat	e:	ZIP Code:					
Name of Employer:	Driver's License or State Identification Card Number (attach a photocopy):										
Business Phone:	Date of Bir	rth:		Applying for: New							
Mailing Address:		Current Expiration Date: Commission Number: County of Residence:									
Current Home Address (P.O. Box not acceptable): Street:		City:			Stat	re:	ZIP Code:				
Do you want your home address to be displayed to t	☐ Yes ☐ No Hor			Hon	ome Phone:						
Has your name, address or county changed since your last commission?   Yes  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 of Applicant:  Notary Public Signature:  Notary Public Signature:  Witnessed and Affirmed this grows a day of the secretary of State to conduct and an other public Signature.  AFFIX NOTARY SEAL HERE											
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											
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-tear term.											
Now, if said principal/applicant shall truly and faithf above obligation to be null and void, otherwise to rercommission to the expiration date of the same.											
XSignature of Principal/Notary Publ	ic Applicant		X	Signature of Au	uthoriz	ed Representative	of Surety Company				
BOND NUMBER				AFFIX CORPORATE SE							