



Non-resident Notary Public Application

Alexi Giannoulas — Illinois Secretary of State

Return completed form to: National Notary Association,
9350 De Soto Avenue, Chatsworth, CA 91311-4926

BOTH SIDES AND ALL FIELDS ARE REQUIRED.

| | | | | | |
|----------------------------|--|---|--|--|------|
| Last Name: | | First Name: | | Middle Name or Initial: | |
| Name of Business Employer: | | Driver's License or State ID Card Number (attach a photocopy): | | | |
| Business Address: Street: | | City: | | State: | ZIP: |
| Business Telephone Number: | | Date of Birth: | | Applying for: <input type="checkbox"/> New Commission <input type="checkbox"/> Renewal of Commission | |
| Business Web Address: | | <input type="checkbox"/> Adding Electronic Notary to Active Notary Public Commission Current Expiration Date: _____ Commission Number: _____ | | | |
| County of Business: | | Email: | | Home Phone: | |
| Home Address: Street: | | City: | | State: | ZIP: |

Are you requesting a Notary Public and Electronic Notary Public Commission? Yes No

If you are requesting a Notary Public and Electronic Notary Public Commission you must also complete the following:

1.) Name(s) of Electronic Notarization System Provider(s): _____

2.) Type of Device(s) (check all that apply) Desktop Computer Laptop Smartphone Tablet Other: _____

Have you had any disciplinary actions, convictions or administrative actions against you? Yes No

If you answer 'Yes,' please provide the following on an additional page: the type of action or conviction, date of same, and the name of the court or agency that took the action and state of the action.

Has your name, address, or county changed since your last commission? Yes No

If 'Yes,' give previous name, address and/or county: _____

Will you perform notarizations remotely by means of audio-video communication? Yes No

Have you ever been a notary public in Illinois or any other state? Yes No

If 'Yes,' list the states: _____

| | |
|--|--|
| <p>NOTARIAL OATH</p> <ol style="list-style-type: none"> I am a U.S. citizen or lawfully admitted for permanent residence. I have worked or maintained a business in Illinois for 30 days preceding the application. I am age 18 or older. I have never been convicted of a felony. I am proficient in the English language. I have never had a notary public commission revoked due to a finding or decision by the Secretary of State. <p>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, including a criminal background check, to confirm the assertions and information provided in the application and to compare and use for official purposes any Illinois driver's license or state identification card information contained in the office's master record.</p> <p>Printed Name (must match your driver's license/ID card) _____</p> <p>Signature of Applicant as Printed Above _____</p> <p>Notary Public Signature: _____</p> <p>Witnessed and Affirmed this _____ day of _____, 20 _____</p> | <p>State of Illinois, County of _____</p> <ol style="list-style-type: none"> If also requesting to be an Electronic Notary, I also certify that I will: comply with the standards set forth by Section 176.835 of the Illinois Notary Rules relating to identify proofing and credential analysis; use a third-party provider who has been certified to act as an electronic notarization system provider in the State of Illinois by the Secretary; upon request by the Secretary, promptly provide any information necessary instructions or techniques supplied by a provider that will allow the notary public's digital certificate and electronic seal to be read and authenticated; and comply with the applicable provisions of the Illinois Notary Act, including Article VI-A. <div style="border: 1px solid black; padding: 10px; text-align: center; margin-top: 20px;"> <p>AFFIX NOTARY SEAL HERE</p> </div> |
|--|--|



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 **Merchants Bonding Company (Mutual)** are held firmly bound unto the People of the State of Illinois, in the penal sum of \$5,000 or \$30,000 (Circle One, See Instructions) 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 one-year term.

Now, if said principal/applicant shall truly and faithfully perform and discharge the duties of said office of Notary Public, or Notary Public and Electronic 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 principal's/applicant's commission to the expiration date of the same.

X _____
Signature of Principal/Notary Public Applicant

X *Larry Taylor* _____
Signature of Authorized Representative of Surety Company



BOND NUMBER

AFFIX CORPORATE SEAL HERE

Instructions for Completing Your Non-Resident Application

1. Complete and Submit Your Notary Public Application and Bond Form

Application:

1 Fill out this section completely. No blank spaces are allowed. Do not use whiteout to correct mistakes. If necessary, line through any mistakes.

2 Please provide IL business address.

3 **IMPORTANT:** Include a legible photocopy of your valid driver's license or state identification card, front and back. **Your home address must match your driver's license.** If you have registered a change of address online, please note. If you need to update your address, visit <http://cyberdriveillinois.com>.

4 Provide at least one phone number.

5 If you are requesting a Notary Public and Electronic Notary Public Commission, add the name of your Electronic Notarization System provider and the device you'll be using.

5a If you answer 'Yes' to the question "Will you perform Notarizations remotely by means of Audio-Visual Communication," you must include a \$30,000 Illinois Notary Bond. If you answer 'No' to this question, you must include only a \$5,000 Illinois Notary Bond. This question applies to both Notary Public and Electronic Notary Public.

Notarial Oath:

6 Print your county of business.

7 Please print your name. Proper format is first name or initial, middle name or initial, and last name exactly as it appears on your driver's license or state identification card. This is how your name will appear on your commission certificate.

8 In the presence of a current IL Notary, sign the notarial oath. **Signature must match printed name.**

9 The signature of the Notary must match their stamp.

Non-resident Notary Public Application
Alexi Giannoulas — Illinois Secretary of State

Return completed form to: National Notary Association, 9350 De Soto Avenue, Chatsworth, CA 91311-4926

BOTH SIDES AND ALL FIELDS ARE REQUIRED.

| | | | |
|--|---|--|-------------------|
| 1 Last Name: <u>Jones</u> | First Name: <u>Pat</u> | Middle Name or Initial: <u>R</u> | |
| Name of Business Employer: <u>ABC Bank</u> | Driver's License or State ID Card Number (attach a photocopy): <u>L252-067-86-945-3</u> | 3 | |
| Business Address: Street: <u>8524 Mason Road</u> | City: <u>Chicago</u> | State: <u>IL</u> | ZIP: <u>60007</u> |
| Business Telephone Number: <u>305-555-1212</u> | Date of Birth: <u>11/15/19XX</u> | Applying for: <input checked="" type="checkbox"/> New Commission <input type="checkbox"/> Renewal of Commission | |
| Business Web Address: _____ | Current Expiration Date: <u>N/A</u> | Commission Number: <u>N/A</u> | |
| County of Business: <u>Cook</u> | Email: _____ | Home Phone: <u>305-555-3962</u> | |
| Home Address: Street: <u>234 West Main Street</u> | City: <u>Kenosha</u> | State: <u>WI</u> | ZIP: <u>53140</u> |
| Are you requesting a Notary Public and Electronic Notary Public Commission? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | | | |
| If you are requesting a Notary Public and Electronic Notary Public Commission you must also complete the following: 5 | | | |
| 1) Name(s) of Electronic Notarization System Provider(s): <u>Spectrum</u> | | | |
| 2) Type of Device(s) (check all that apply) <input checked="" type="checkbox"/> Desktop Computer <input type="checkbox"/> Laptop <input type="checkbox"/> Smartphone <input type="checkbox"/> Tablet <input type="checkbox"/> Other: _____ | | | |
| Have you had any disciplinary actions, convictions or administrative actions against you? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | | |
| If you answer 'Yes,' please provide the following on an additional page: the type of action or conviction, date of same, and the name of the court or agency that took the action and state of the action. | | | |
| Has your name, address, or county changed since your last commission? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | | |
| If 'Yes,' give previous name, address and/or county: _____ | | | |
| 5a Will you perform notarizations remotely by means of audio-video communication? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | | | |
| Have you ever been a notary public in Illinois or any other state? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | | | |
| If 'Yes,' list the states: <u>Illinois</u> | | | |
| NOTARIAL OATH | | State of Illinois, County of <u>Cook</u> 6 | |
| 1. I am a U.S. citizen or lawfully admitted for permanent residence. | | 7. If also requesting to be an Electronic Notary, I also certify that I will comply with the standards set forth by Section 170.835 of the Illinois Notary Rules relating to identity proofing and credential analysis; use a third-party provider who has been certified to act as an electronic notarization system provider in the State of Illinois by the Secretary, upon request by the Secretary, promptly provide any information necessary instructions or techniques supplied by a provider that will allow the notary public's digital certificate and electronic seal to be read and authenticated; and comply with the applicable provisions of the Illinois Notary Act, including Article VI-A. | |
| 2. I have worked or maintained a business in Illinois for 30 days preceding the application. | | 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, including a criminal background check, to confirm the assertions and information provided in the application and to compare and use for official purposes any Illinois driver's license or state identification card information contained in the office's master record. | |
| 3. I am age 18 or older. | | Printed Name (must match your driver's license/ID card) <u>Pat R. Jones</u> 7 | |
| 4. I have never been convicted of a felony. | | Signature of Applicant as Printed Above <u>Pat R. Jones</u> 8 | |
| 5. I am proficient in the English language. | | Notary Public Signature: <u>Janet R. Jenkins</u> 9 | |
| 6. I have never had a notary public commission revoked due to a finding or decision by the Secretary of State. | | Witnessed and Affirmed this <u>12</u> day of <u>March</u> , 20 <u>XX</u> | |

AFFIX NOTARY SEAL HERE

Important: Please Complete Pages 1-2 1

Important!

- Do not leave any blank spaces.
- Do not use whiteout. Line through and correct any mistakes.
- Include a copy of a valid driver's license, front and back.
- Have your application notarized.
- IA, IN, KY, MO & WI residents only.

Fill out your application safely and securely!
NationalNotary.org/State-Applications/Illinois



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 Pat R. Jones **10** as principal applicant and **11** Merchants Bonding Company (Mutual) are held firmly bound unto the People of the State of Illinois, in the penal sum of \$5,000 or \$30,000 (Circle One, See Instructions) 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 one-year term.

Now, if said principal applicant shall truly and faithfully perform and discharge the duties of said office of Notary Public, or Notary Public and Electronic 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 principal applicant's commission to the expiration date of the same.

x Pat R. Jones **12** x [Signature]
Signature of Principal/Notary Public Applicant Signature of Authorized Representative of Surety Company

BOND NUMBER **13** **AFFIX CORPORATE SEAL HERE**

Important: Please Complete Pages 1-2 2

Notary Public Bond:

- 10** Print your name exactly as it appears on your driver's license or state identification card.
- 11** Do not circle \$5,000 or \$30,000, the NNA will complete this step.
- 12** Sign your name here, as you printed and signed on the notarial oath. Your signature must match — abbreviations cannot be used.
- 13** Leave this blank. The bond number will be completed by our office.

2. Payment and Application Submittal

Forward an **original** Application/Bond form, not a copy, with your payment and ID photocopies to:

National Notary Association
9350 De Soto Avenue
Chatsworth, CA 91311-4926

If ordering by mail or fax, include your order form, noting your choice of package. All packages include the \$10 State Application Fee — a separate check is not required.

Important!

- Do not leave any blank spaces.
- Do not use whiteout. Line through and correct any mistakes.
- Include a copy of a valid driver's license, front and back.
- Have your application notarized.
- IA, IN, KY, MO & WI residents only.



Fill out your application safely and securely!
NationalNotary.org/State-Applications/Illinois