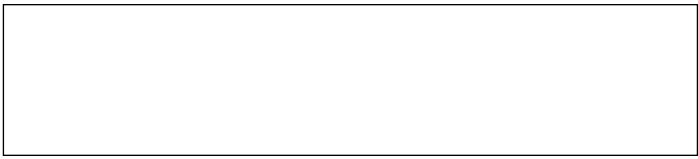




Notary Public Application

Alexi Giannoulis
Illinois Secretary of State



BOTH SIDES AND ALL FIELDS ARE REQUIRED.

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

Last Name:		First Name:		Middle Name or Initial:	
Business Address: Street:		City:		State:	ZIP:
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 <input type="checkbox"/> Adding Electronic Notary to Active Notary Public Commission Current Expiration Date: _____ Commission Number: _____		
Email Address:		Home Phone:		County of Residence:	
Current Home Address (Driver's License address must match): Street:		City:		State:	ZIP:
Are you requesting a Notary Public and Electronic Notary Public Commission? <input 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:					
1.) Name(s) of Electronic Notarization System Provider(s): _____					
2.) Type of Device(s) (check all that apply) <input 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 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 type="checkbox"/> No					
If 'Yes,' give previous name, address and/or county: _____					
Will you perform Notarizations remotely by means of Audio-Video Communication? <input type="checkbox"/> Yes <input type="checkbox"/> No					

NOTARIAL OATH		State of Illinois, County of _____	
1. I am a U.S. citizen or lawfully 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 proficient in the English language. 6. I have never had a notary public commission revoked due to a finding or decision by the Secretary of State.		7. If also requesting to be an Electronic Notary Public, 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.	
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.			
Printed Name (must match your driver's license/ID card) _____		AFFIX NOTARY SEAL HERE	
Signature of Applicant as Printed Above _____			
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 **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 four-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

Disciplinary Actions, Convictions or Administrative Actions:

Improve Your Application's Chances

Most of the applications that get rejected are due to avoidable errors. Help your application process go smoothly! Go over these tips before you put pen to paper.

AVOID ERRORS THAT WILL DELAY YOUR COMMISSION

- DO**
 - Do print all letters and numbers legibly.
 - Do fill out all sections completely. Do not leave any blanks.
 - Do make cross-outs and corrections — please initial them if you make any.
 - Do make sure your name and signature matches exactly your printed name on your Driver's License/ID card.

- DON'T**
 - Don't write in cursive or use abbreviations.
 - Don't leave spaces blank (except as noted).
 - Don't use correction fluid (whiteout) to correct mistakes.
 - Don't sign your name differently than your printed name on your Driver's License/ID card.

Notary Public Application
Alexi Giannoulas
Illinois Secretary of State

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

Last Name: <u>Jones</u> 1		First Name: <u>Pat</u>		Middle Name or Initial: <u>R.</u>	
Business Address: Street: <u>234 West Main Street</u> 2		City: <u>Chicago</u>	State: <u>IL</u>	ZIP: <u>60007</u>	
Name of Employer: <u>Self-employed</u> 3		Driver's License or State Identification Card Number (attach a photocopy): <u>L252-067-86-945-3</u>			
Business Phone: <u>305-555-1212</u> 4		Date of Birth: <u>11/15/19XX</u>		Applying for: <input checked="" type="checkbox"/> New Commission <input type="checkbox"/> Renewal of Commission <input type="checkbox"/> Adding Electronic Notary to Active Notary Public Commission Current Expiration Date: <u>n/a</u> Commission Number: <u>n/a</u>	
Email Address: <u>pjones@abcbank.com</u> 5		Home Phone: <u>305-555-3962</u>		County of Residence: <u>Cook</u>	
Current Home Address (Driver's License address must match): Street: <u>8524 Mason Road</u> 6		City: <u>Chicago</u>	State: <u>IL</u>	ZIP: <u>60007</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: 7					
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: _____					
7a Will you perform Notarizations remotely by means of Audio-Video Communication? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No					

NOTARIAL OATH State of Illinois, County of Cook **8**

1. I am a U.S. citizen or lawfully 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 proficient in the English language.
 6. I have never had a notary public commission revoked due to a finding or decision by the Secretary of State.

7. If also requesting to be an Electronic Notary Public, I also certify that I will: comply with the standards set forth by Section 176.535 of the Illinois Notary Publics 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 V-A.

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.

Printed Name (must match your driver's license/ID card): Pat R. Jones **9**

Signature of Applicant as Printed Above: Pat R. Jones **10**

Notary Public Signature: James R. Harkins **11**

Witnessed and Affirmed this 12 day of March, 20 XX

AFFIX NOTARY SEAL HERE

JAMES R. HARKINS
OFFICE SEAL
Notary Public - State of Illinois
My Commission Expires July 30, 2024

Important: Please Complete Pages 1-2 1

Your Information

- 1** Your name MUST match your IL driver's license or state identification card, or your application will be rejected.
- 2** Include a business address only if it's different from your residential address. If it doesn't apply, or if you aren't going to perform notarizations for your job, write "N/A."
- 3** If you are self-employed, write "Self Employed."
- 4** The phone number for your employer or business. If you're self-employed, this can be the same as your home phone.
- 5** An email address is needed to receive correspondence from the Secretary of State.
- 6** Your home address must match your IL driver's license or state identification card. If you have registered a change of address online, please note. If you need to update your address, please visit www.ilsos.gov.
- 7** 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.
- 7a** 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

- Complete this section in the presence of a current IL Notary Public.
- 8** Print the name of the county you live in.
 - 9** Print your name to match your IL driver's license or state identification card.
 - 10** Your signature must match your printed name.
 - 11** The signature of the Notary must match their stamp.


Fill out your application online at



**NationalNotary.org/
State-Applications/Illinois**

**and avoid common errors.
It's safe, simple and secure!**



Fill out your application online at
 **NationalNotary.org/**
State-Applications/Illinois
 and avoid common errors.
 It's safe, simple and secure!

AVOID ERRORS THAT WILL DELAY YOUR COMMISSION

DO

- Do print all letters and numbers legibly.
- Do fill out all sections completely. Do not leave any blanks.
- Do make cross-outs and corrections — please initial them if you make any.
- Do make sure your name and signature matches exactly your printed name on your Driver's License/ID card.

DON'T

- Don't write in cursive or use abbreviations.
- Don't leave spaces blank (except as noted).
- Don't use correction fluid (whiteout) to correct mistakes.
- Don't sign your name differently than your printed name on your Driver's License/ID card.

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 **12** 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.

13

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, 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 **14** X [Signature]
 Signature of Principal/Notary Public Applicant Signature of Authorized Representative of Surety Company

BOND NUMBER **15** **AFFIX CORPORATE SEAL HERE**

Important: Please Complete Pages 1-2 2

Notary Public Bond

- 12** Print your name to match exactly your commission name and IL driver's license or state identification card (step 9).
- 13** Do not circle \$5,000 or \$30,000, the NNA will do it for you.
- 14** Your signature must match your commission name (step 9).
- 15** Leave this blank. We will fill in the bond number.

READY TO SEND IN YOUR APPLICATION? MAKE SURE YOU HAVE THE FOLLOWING:

- An original application form, completed and notarized. Photocopies are not accepted.
- A copy of your proof of completion certificate from a Notary Public Study Course approved by the Illinois Secretary of State.
- A legible photocopy of your IL driver's license or state identification card, front and back. If the address on your ID is being updated, write "Address change pending."
- If ordering by mail, a completed order form with your supply package chosen and payment.
- Mail the above to:
 National Notary Association
 9350 De Soto Avenue
 Chatsworth, CA 91311-4926

