

KANSAS NOTARY "DISCOUNT" ASSOCIATION

Corporate Mailing Address: 550 Hulet Drive, Suite 105, Bloomfield Hills, MI 48302

 Phone:
 1-800-366-8279

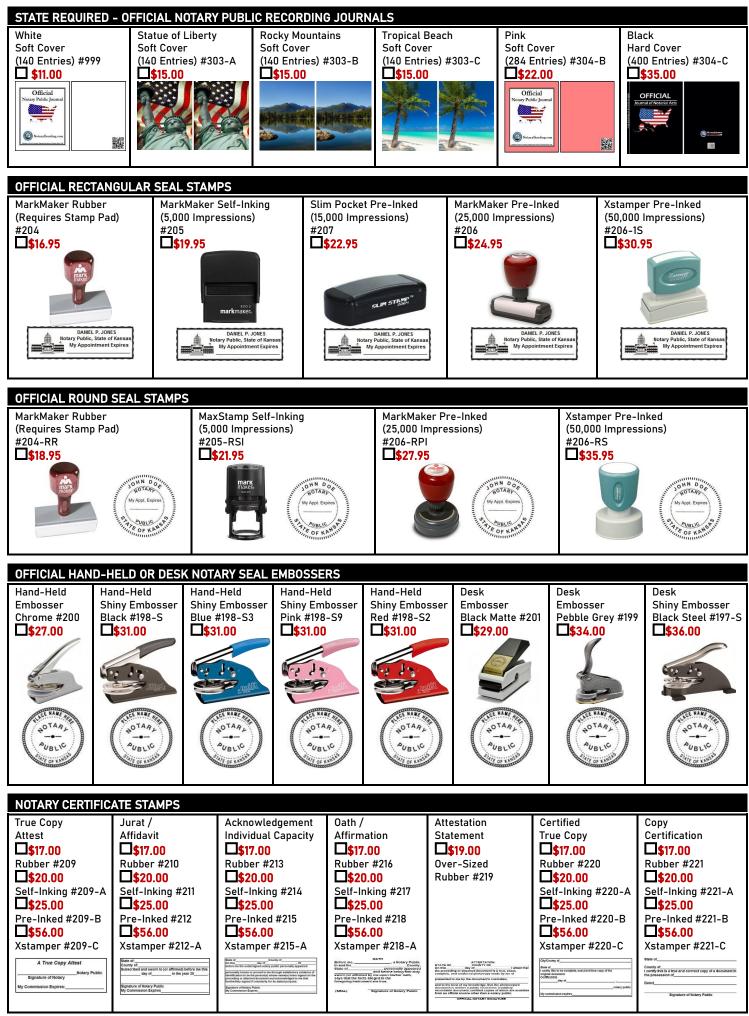
 Phone:
 1-800-3-NOTARY

 Fax:
 1-800-637-5992

 Email:
 info@notarybonding.com



SELECT THE NOTARY PACKAGE THAT'S RIGHT FOR YOU.	New or Renewal Basic Package \$50.00	New or Renewal Standard Package \$69.00	New or Renewal Deluxe Package \$119.00	New or Renewal Elite Package \$139.00	New or Renewal Superior Package \$164.00
Kansas 4 Year \$1 2,000 Notary Bond.			V	\checkmark	\checkmark
Official Rectangular Self-Inking Seal Stamp.		V	V	\checkmark	\checkmark
4 Year Toll-Free Hotline Notary Support.	\checkmark	V	V	\checkmark	V
Kansas 4 Year \$1 0,000 E&O Insurance.	\checkmark	V			
Kansas 4 Year \$15,000 E&O Insurance.			V		
Kansas 4 Year \$20,000 E&O Insurance.				\checkmark	
Kansas 4 Year \$35,000 E&O Insurance.					\checkmark
NEW OR RENEWAL NOTARY BOND PACKAGES					
Stone Basic \$69.00 Standard \$119.00 Deluxe \$139.00 Elite \$164.00 Superior					
SHIPPING (*TRACKABLE)					
ADDITIONAL NOTARY E&O 4 YEAR INSURANCE					
\$50.00 \$5,000 Notary E&O 4 Year Insurance \$70.00 \$10,000 Notary E&O 4 Year Insurance \$95.00 \$25,000 Notary E&O 4 Year Insurance					
EXPRESS NOTARY BOND SERVICE					
\$15.00 Receive your Kansas notary public bond via email in 1 business day or less.					
NOTARY INFORMATION					
Name As Commissioned:					
🗖 New Notary 🛛 Renewal Notary - Renewal Notary Indicate Your Appointment Expiration Date (MM/DD/YYYY):					
Daytime Phone: Other Phone: Other Phone:					
Email Address:					
Residence Address - P.O. Boxes Are Not Accepted:					
City:Zip Code:Residence County:					
*If Applicable - *Ship To Address:					
*Ship To City: *Ship To State: *Ship To Zip Code:					
PAYMENT OPTIONS			JMMARY OF TOTAL		
Check/Money Order (make payable to: Kansas Not	-	N	OTARY BOND PACKA	GE: \$	<u>. </u>
Check Number (on upper right side of check):			DDITIONAL E&O INSU	JRANCE: \$	
Visa MasterCard American Express			(PRESS NOTARY BO	•	
			JPPLIES (ON BACK I		
CC Expiration Date (MM/YY):	CVV Code:				
Cardholder Name:			HIPPING:	\$	
Billing Address: Sta		G	RAND TOTAL:	\$	
				-	



NotaryBonding.com/Store/Kansas