

# Notary Service and Bonding Agency, Inc.

"Serving over a million notaries nationwide since 1940"

Attn: Maine Notary Processing Dept. 550 Hulet Drive, Suite 105

Bloomfield Hills, MI 48302

Toll Free: (800) 366 - 8279 Email: info@notarybonding.com Fax: (800) 637 - 5992 Website: notarybonding.com

## **BASIC** LOW COST



NEW OR RENEWAL **NOTARY PACKAGE** "A"

\$27.00

### **PACKAGE INCLUDES:**

Official Notary Public Journal (Soft Cover)

Self-Inking Rectangular Official Stamp Seal (5,000 Impressions)



YOUR NAME Notary Public-Maine My Commission Expires January 23, 2023

## **STANDARD** LOW COST



NEW OR RENEWAL **NOTARY PACKAGE** "B"

\$80.00

### PACKAGE INCLUDES:

\$5,000 Notary Errors & **Omissions 7 Year Policy** 

Official Notary Public Journal (Soft Cover)

Self-Inking Rectangular Official Stamp Seal (5,000 Impressions)



YOUR NAME Notary Public-Maine My Commission Expires January 23, 2023

## **DELUXE LOW COST**



NEW OR RENEWAL **NOTARY PACKAGE "C**"

\$115.00

### **PACKAGE INCLUDES:**

\$10,000 Notary Errors & **Omissions 7 Year Policy** 

Official Notary Public Journal (Soft Cover)

Self-Inking Rectangular Official Stamp Seal (5,000 Impressions)



YOUR NAME Notary Public-Maine My Commission Expires January 23, 2023

## **ELITE LOW COST**



NEW OR RENEWAL **NOTARY PACKAGE** "D"

\$159.00

### **PACKAGE INCLUDES:**

\$25,000 Notary Errors & **Omissions 7 Year Policy** 

Official Notary Public Journal (Soft Cover)

Self-Inking Rectangular Official Stamp Seal (5,000 Impressions)



YOUR NAME Notary Public-Maine My Commission Expires January 23, 2023

#### MAINE LOW COST L NOTARY PACKAGE ORDER FORM:

		FORM OF PAYMENT OPTIONS:	
		Type or print the check or money orde	er number below:
		#	
SELECT YOUR NOTARY PACKAG	<u>E:</u>	Payable to: Notary Service and Bonding Agency, Inc.	
Basic Notary Package "A"	\$27.00	OR	
Standard Notary Package "B"	\$80.00	Charge:VisaMasterCard _	_AM/EXDiscover
Deluxe Notary Package "C"	\$115.00		
Elite Notary Package "D"	\$159.00	Credit Card Number	<b>Expiration Date</b>
		X	
GRAND TOTAL AMOUNT:	\$	Signature of Cardholder (Required for Credit Card Purchases)	
		REQUIRED INFORMATION:	
		Name as Commissioned:	
		Mailing Address (Address, City, State & Zip Code):	
		Commission Expiration Date:	
		Daytime Phone:	
ME-02 05/15		Email:	