



# Notary Service and Bonding Agency, Inc.

“Serving over a million notaries nationwide since 1940”

550 Hulet Drive, Suite 105  
Bloomfield Hills, MI 48302

Toll Free: (800) 366 - 8279  
Email: info@notarybonding.com

Fax: (800) 637 - 5992  
Web: notarybonding.com

<b>“BASIC” LOW COST</b>	<b>“STANDARD” LOW COST</b>	<b>“DELUXE” LOW COST</b>	<b>“ELITE” LOW COST</b>
			
<b>NEW OR RENEWAL NOTARY PACKAGE “A”</b>	<b>NEW OR RENEWAL NOTARY PACKAGE “B”</b>	<b>NEW OR RENEWAL NOTARY PACKAGE “C”</b>	<b>NEW OR RENEWAL NOTARY PACKAGE “D”</b>
<b>\$27.00</b>	<b>\$80.00</b>	<b>\$115.00</b>	<b>\$159.00</b>
<b>PACKAGE INCLUDES:</b> Self-Inking Rect. Official Stamp Seal (Over 5,000 Impressions)	<b>PACKAGE INCLUDES:</b> Self-Inking Rect. Official Stamp Seal (Over 5,000 Impressions)	<b>PACKAGE INCLUDES:</b> Self-Inking Rect. Official Stamp Seal (Over 5,000 Impressions)	<b>PACKAGE INCLUDES:</b> Self-Inking Rect. Official Stamp Seal (Over 5,000 Impressions)
			
Official Notary Public Journal (Soft Cover)	<b>\$5,000</b> Errors & Omissions “Seven” Year Insurance Policy	<b>\$10,000</b> Errors & Omission “Seven” Year Insurance Policy	<b>\$25,000</b> Errors & Omissions “Seven” Year Insurance Policy
Toll Free Telephone and Email Support	Official Notary Public Journal (Soft Cover)	Official Notary Public Journal (Soft Cover)	Official Notary Public Journal (Soft Cover)
Toll Free Telephone and Email Support	Toll Free Telephone and Email Support	Toll Free Telephone and Email Support	Toll Free Telephone and Email Support

## MAINE LOW COST **NEW OR RENEWAL** NOTARY PACKAGE ORDER FORM:

### SELECT YOUR NOTARY PACKAGE:

- “BASIC”** NOTARY PACKAGE “A” **\$27.00**  
 **“STANDARD”** NOTARY PACKAGE “B” **\$80.00**  
 **“DELUXE”** NOTARY PACKAGE “C” **\$115.00**  
 **“ELITE”** NOTARY PACKAGE “D” **\$159.00**

**GRAND TOTAL AMOUNT:** \$ \_\_\_\_\_

### FORM OF PAYMENT OPTIONS:

TYPE OR PRINT THE CHECK OR MONEY ORDER NUMBER:  
# \_\_\_\_\_

PAYABLE TO: **NOTARY SERVICE AND BONDING AGENCY, INC.**

CHARGE: \_\_\_VISA \_\_\_MATERCARD \_\_\_AM/EX \_\_\_DISCOVER

CREDIT CARD # \_\_\_\_\_

EXPIRATION DATE \_\_\_\_\_

**X** \_\_\_\_\_  
SIGNATURE OF CARDHOLDER (REQUIRED FOR CREDIT CARD PURCHASES)

### REQUIRED INFORMATION:

NAME AS COMMISSIONED: \_\_\_\_\_

COMMISSION EXPIRATION DATE: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_