

NOTARY ASSOCIATION OF TEXAS, INC.

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New or Renewal New or Renewal New or Renewal New or Renewal SELECT THE NOTARY PACKAGE THAT'S RIGHT FOR YOU. Deluxe Elite **Ultimate** Superior Package Package Package Package ACCREDITED BUSINESS \$76.00 \$79.00 \$90.00 \$87.00 Texas 4 Year \$10,000 Notary Bond. Texas State Filing Fee of \$21.00. 4 Year Toll-Free Hotline Notary Support. Official Rectangular JOHN Q. DOE Notary ID 0123456789 ly Commission Self-Inking Seal Stamp. Official Round Self-Inking Seal Stamp. Official Notary Public Recording Journal. $\frac{1}{2}$ NEW OR RENEWAL NOTARY BOND PACKAGES & SEAL STAMP INK COLOR \$76.00 Deluxe Package \$79.00 Elite Package □\$87.00 Ultimate Package \$90.00 Superior Package ■ Black Seal Stamp Ink Blue Seal Stamp Ink Blue Seal Stamp Ink Blue Seal Stamp Ink Blue Seal Stamp Ink SHIPPING (*TRACKABLE) \$8.00 Standard Shipping & Handling \$\square\$\$16.00 *FedEx Ground \$\square\$\$20.00 *FedEx 3 Day \$\square\$\$25.00 *FedEx 2 Day \$\square\$\$37.00 *UPS Next Day **NOTARY E&O 4 YEAR INSURANCE** □\$32.00 \$10,000 Notary E&O 4 Year Insurance □\$40.00 \$15,000 Notary E&O 4 Year Insurance \$16.00 \$5,000 Notary E&O 4 Year Insurance 46.00 \$20,000 Notary E&O 4 Year Insurance \$52.00 \$25,000 Notary E&O 4 Year Insurance \$58.00 \$30,000 Notary E&O 4 Year Insurance Licensed Texas Agent of Contractors Bonding and Insurance Company an RLI Company. Underwritten by Contractors Bonding and Insurance Company an RLI Company through Notary Association of Texas, Inc. PRIORITY APPLICATION PROCESSING \$35.00 Did you wait until the last minute to apply for your commission? Save time with our optional priority application processing! NOTARY INFORMATION Full Name: _____ ______ Phone: _____ Email: Mailing Address: ______ __ Mailing State: _____ Mailing Zip Code: _____ Mailing City: ___ PAYMENT OPTIONS **SUMMARY OF TOTALS** Check/Money Order (make payable to: Notary Association of Texas Inc.) **NOTARY BOND PACKAGE:** Check Number (on upper right side of check): ____ **ADDITIONAL E&O INSURANCE:** U Visa MasterCard American Express Discover PRIORITY PROCESSING: **SUPPLIES (ON BACK PAGE):** CC Expiration Date (MM/YY): ______ CVV Code: ______ Cardholder Name: ______ SHIPPING: **GRAND TOTAL:** ______ State: _____ Zip Code: ___









