



1-800-366-8279 1-800-3-NOTARY Phone: Phone: Fax: 1-800-637-5992



Email: info@notarybonding.com

"Offering A Program For Notaries Since 1940"	New or Renewal Basic Package \$76.00	New or Renewal Standard Package \$79.00	New or Renewal Deluxe Package \$82.00	New or Renewal Elite Package \$86.00	New or Renewal Ultimate Package \$99.00	New or Renewal Superior Package \$109.00	
INCLUDES: Required by law a \$10,000 Notary Public 4 Year Bond \$50.00 licensed Texas Agent of Contractors Bonding & Insurance Co. an RLI Co.	X	X	X	X	X	Х	
INCLUDES: Texas Secretary of State Filing Fee of \$21.00.	X	X	X	X	X	X	
INCLUDES: Official Self-Inking Rect. Seal Stamp.	X						
INCLUDES: Official Self-Inking Round Seal Stamp.		X					
INCLUDES: Official Pre-Inked Rect. Seal Stamp.			X				
INCLUDES: Official Pre-Inked Round Seal Stamp.				X			
INCLUDES: Official Xstamper Rect. Seal Stamp. Seal Stamp.					X		
INCLUDES: Official Xstamper Round Seal Stamp.						X	
·	ard \$82.00 De e Stamp Ink	SELECT A STA eluxe □\$86.00 E □\$20.00 *FedEx	ilite \$99.00	Ultimate \$109	_		
*Trackab	le shipping with F	FedEx or UPS. Fed	•	•		•	
OPTIONAL NOTARY ERRORS & OMISSIONS 4 \$16.00 \$5,000 Notary E&O 4 Year Policy \$46.00 \$20,000 Notary E&O 4 Year Policy Licensed Texas Agent of Contractors Bonding and	\$32.00 \$10,0 \$52.00 \$25,0	00 Notary E&O 4 Y 100 Notary E&O 4 Y Dany an RLI Compa	ear Policy	\$58.00 \$30,00	0 Notary E&O 4 Yo 10 Notary E&O 4 Y Bonding and Insur	ear Policy	
an RLI Company through Notary Association of To							
OPTIONAL PRIORITY APPLICATION PROCES: \$35.00 Did you wait until the last minute to apply We highly recommend payment by cree COMPLETE MANDATORY INFORMATION	oly for your comm dit card or money	order. Payments	made by check n			til cleared.	
	Phone:						
Mailing Address: Mailing City:				tate: Ma	iling Zip Code: _		
COMPLETE PAYMENT METHOD VIA CREDIT (, , , , , , , , , , , , , , , , , , ,		J		
				Pay by Check:			
CC Number:				Check Payable to: Notary Association of Texas, Inc.			
CC Expiration Date (MM/YY):		:		ber:		_	
Cardholder Name:Signature of Cardholder: X				AMOUNT: \$ _			
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