



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

<p><b>“BASIC” LOW COST</b></p>  <p><b>NEW OR RENEWAL NOTARY PACKAGE “A”</b></p> <p><b>\$55.00</b></p> <p><b>PACKAGE INCLUDES:</b> \$5,000 Errors &amp; Omissions “5” Year Insurance Policy</p> <p>Self-Inking Rect. Official Stamp Seal (Over 5,000 Impressions)</p>  <p>Toll Free Telephone and Email Support</p>	<p><b>“STANDARD” LOW COST</b></p>  <p><b>NEW OR RENEWAL NOTARY PACKAGE “B”</b></p> <p><b>\$64.00</b></p> <p><b>PACKAGE INCLUDES:</b> \$5,000 Errors &amp; Omissions “5” Year Insurance Policy</p> <p>Self-Inking Rect. Official Stamp Seal (Over 5,000 Impressions)</p>  <p>Official Notary Public Journal (Soft Cover)</p> <p>Toll Free Telephone and Email Support</p>	<p><b>“DELUXE” LOW COST</b></p>  <p><b>NEW OR RENEWAL NOTARY PACKAGE “C”</b></p> <p><b>\$89.00</b></p> <p><b>PACKAGE INCLUDES:</b> \$10,000 Errors &amp; Omissions “5” Year Insurance Policy</p> <p>Self-Inking Rect. Official Stamp Seal (Over 5,000 Impressions)</p>  <p>Official Notary Public Journal (Soft Cover)</p> <p>Toll Free Telephone and Email Support</p>	<p><b>“ELITE” LOW COST</b></p>  <p><b>NEW OR RENEWAL NOTARY PACKAGE “D”</b></p> <p><b>\$120.00</b></p> <p><b>PACKAGE INCLUDES:</b> \$25,000 Errors &amp; Omissions “5” Year Insurance Policy</p> <p>Self-Inking Rect. Official Stamp Seal (Over 5,000 Impressions)</p>  <p>Official Notary Public Journal (Soft Cover)</p> <p>Toll Free Telephone and Email Support</p>
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## OHIO LOW COST NEW OR RENEWAL NOTARY PACKAGE ORDER FORM:

SELECT YOUR NOTARY PACKAGE:

- “BASIC” NOTARY PACKAGE “A” \$55.00**
- “STANDARD” NOTARY PACKAGE “B” \$64.00**
- “DELUXE” NOTARY PACKAGE “C” \$89.00**
- “ELITE” NOTARY PACKAGE “D” \$120.00**

**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 \_\_\_MASTERCARD \_\_\_AM/EX \_\_\_DISCOVER

\_\_\_\_\_ CREDIT CARD NUMBER \_\_\_\_\_ EXPIRATION DATE

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

REQUIRED INFORMATION:

Name as Commissioned: \_\_\_\_\_  
County Commissioned In: \_\_\_\_\_  
Commission Expiration Date: \_\_\_\_\_  
Phone Number: \_\_\_\_\_  
Email Address: \_\_\_\_\_