



Oklahoma Notary "Discount" Association Co.

"Serving over a million notaries nationwide since 1940"

P.O. Box 2725
Oklahoma City, OK 73101

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Email: info@notarybonding.com

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

"BASIC" LOW COST	"STANDARD" LOW COST	"DELUXE" LOW COST	"ELITE" LOW COST
 <p>RECENTLY APPOINTED NOTARY BOND PACKAGE "A"</p> <p>\$30.00</p> <p>PACKAGE INCLUDES: Required \$1,000 Notary Public "4" Year Bond \$5,000 Total Errors & Omissions "4" Year Policy Notary Static Window Decal</p>	 <p>RECENTLY APPOINTED NOTARY BOND PACKAGE "B"</p> <p>\$39.90</p> <p>PACKAGE INCLUDES: Required \$1,000 Notary Public "4" Year Bond \$5,000 Total Errors & Omissions "4" Year Policy Official Self-Inking Rectangular Stamp Seal (Over 5,000 Imp.)</p>  <p>Notary Static Window Decal</p>	 <p>RECENTLY APPOINTED NOTARY BOND PACKAGE "C"</p> <p>\$42.90</p> <p>PACKAGE INCLUDES: Required \$1,000 Notary Public "4" Year Bond \$5,000 Total Errors & Omissions "4" Year Policy Official Self-Inking Round Stamp Seal (Over 5,000 Imp.)</p>  <p>Notary Static Window Decal</p>	 <p>RECENTLY APPOINTED NOTARY BOND PACKAGE "D"</p> <p>\$48.90</p> <p>PACKAGE INCLUDES: Required \$1,000 Notary Public "4" Year Bond \$5,000 Total Errors & Omissions "4" Year Policy Official Pre-Inked Round Stamp Seal (Over 25,000 Imp.)</p>  <p>Notary Static Window Decal</p>

OKLAHOMA LOW COST RECENTLY APPOINTED NOTARY BOND PACKAGE ORDER FORM

OPTIONAL OFFICIAL NOTARY JOURNAL:

OFFICIAL NOTARY PUBLIC JOURNAL (SOFT COVER)
 \$5.00

SELECT YOUR NOTARY BOND PACKAGE:

- "BASIC" NOTARY PACKAGE "A" \$30.00**
- "STANDARD" NOTARY PACKAGE "B" \$39.90**
- "DELUXE" NOTARY PACKAGE "C" \$42.90**
- "ELITE" NOTARY PACKAGE "D" \$48.90**

FORM OF PAYMENT OPTIONS:

TYPE OR PRINT THE CHECK OR MONEY ORDER NUMBER:
 # _____

PAYABLE TO: **OKLAHOMA NOTARY "DISCOUNT" ASSOCIATION Co.**

CHARGE: ___VISA ___MATERCARD ___AM/EX ___DISCOVER

CREDIT CARD # _____

EXPIRATION DATE _____

X _____
 SIGNATURE OF CARDHOLDER (REQUIRED FOR CREDIT CARD PURCHASES)

REQUIRED INFORMATION:

NEW COMMISSION NUMBER: _____

EXPIRATION DATE: _____

FULL NAME AS COMMISSIONED: _____

COUNTY COMMISSIONED IN: _____

PHONE NUMBER: _____

FULL ADDRESS: _____

GRAND TOTAL AMOUNT

