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Rider Order Form – Notary Association of Texas, Inc.

Phone: 1-800-366-8279 www.NotaryBonding.com

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Mail: Notary Assoc. of Texas, Inc., 1108 Lavaca St., Suite 110-902, Austin, TX 78701 OPTIONAL TEXAS CHANGE OF NAME NOTARY BOND RIDER ORDER FORM **OLD INFORMATION** Name As Commissioned: Address: ______ State: _____ Zip Code: _____ County: _____ City: ___ _____ Commission Expiration Date – Month: _____ Day: _____ Year: ____ Notary ID Number: ____ *Bond Number (If Known): ____ **NEW INFORMATION** Name As Commissioned: ___ Address: ______ State: _____ Zip Code: _____ County: _____ City: ___ Email: Daytime Phone: TEXAS CHANGE OF NAME NOTARY BOND RIDER \$15.00 Texas Change of Name Notary Bond Rider - Purchasing ONLY the rider then you will NOT need to select the shipping method below. SHIPPING - *GAIN MORE CONTROL OF YOUR PACKAGES WITH FEDEX TRACKABLE SHIPPING \$10.00 USPS Standard Shipping \$20.00 *FedEx Ground (Trackable) \$30.00 *FedEx 3 Day (Trackable) \$40.00 *FedEx 2 Day (Trackable) **OFFICIAL ROUND SEAL STAMPS** Xstamper Pre-Inked MarkMaker Rubber MarkMaker Self-Inking MarkMaker Pre-Inked (Requires Stamp Pad) #204-RR (5,000 Impressions) #205-RSI (25,000 Impressions) #206-RPI (50,000 Impressions) #206-RS □\$18.95 □\$35.95 **\$27.95** \$21.95 ☐ ■ Black Stamp Ink ☐ ■ Black Stamp Ink ☐ ■ Black Stamp Ink Blue Stamp Ink Blue Stamp Ink Blue Stamp Ink OFFICIAL RECTANGULAR SEAL STAMPS MarkMaker Self-Inking Slim Pocket Pre-Inked MarkMaker Pre-Inked Xstamper Pre-Inked MarkMaker Rubber (Requires Stamp Pad) (5,000 Impressions) (50,000 Impressions) (15,000 Impressions) (25,000 Impressions) #205 #206-1S #206 #204 #207 □\$16.95 \$19.95 □\$22.95 **\$24.95** \$30.95 ☐ ■ Black Stamp Ink ☐ ■ Black Stamp Ink ☐ ■ Black Stamp Ink Black Stamp Ink Blue Stamp Ink Blue Stamp Ink Blue Stamp Ink Blue Stamp Ink JOHN Q. DOE Notary ID 0123456789 My Commission Expires June 27, 2027 My Commission Expires June 27, 2027 ommission Expires June 27, 2027 SUMMARY OF TOTALS Check/Money Order (make payable to: Notary Association of Texas, Inc.) **NOTARY BOND RIDER:** Check Number (on upper right side of check): _ STAMP(S): ☐ MasterCard ☐ American Express Discover CC Number: ______ SHIPPING:

_____ State: ____ Zip Code: ___

CC Expiration Date (MM/YY): |___|__|

Cardholder Name: _____

CVV Code: ______

GRAND TOTAL: