Utah Notary "Discount" Association

"Serving over a million notaries nationwide since 1940"

NOTARY BONDING EXCELLENCE SINCE 1940

550 Hulet Drive, Suite 105
Bloomfield Hills, MI 48302

Toll Free: (800) 366 - 8279
Email: info@notarybonding.com

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

BASIC	STANDARD	DELUXE	ELITE
LOW COST	LOW COST	LOW COST	LOW COST

NEW OR RENWAL	NEW OR RENWAL	NEW OR RENWAL	NEW OR RENWAL
NOTARY BOND PACKAGE "A"	NOTARY BOND PACKAGE "B"	NOTARY BOND PACKAGE "C"	NOTARY BOND PACKAGE "D"
$50.00	$96.00	$116.00	$141.00
Package Includes:	**Package Includes:**	**Package Includes:**	**Package Includes:**
Required $5,000 Notary Public 4 Year Bond	Required $5,000 Notary Public 4 Year Bond	Required $5,000 Notary Public 4 Year Bond	Required $5,000 Notary Public 4 Year Bond
$5,000 Notary Errors & Omissions 4 Year Policy	$10,000 Notary Errors & Omissions 4 Year Policy	$15,000 Notary Errors & Omissions 4 Year Policy	$30,000 Notary Errors & Omissions 4 Year Policy
Notary Static Window Decal	Notary Static Window Decal	Notary Static Window Decal	Notary Static Window Decal
	Official Self-Inking Round Stamp Seal – Purple Ink (5,000 Impressions)	Official Self-Inking Round Stamp Seal – Purple Ink (5,000 Impressions)	Official Self-Inking Round Stamp Seal – Purple Ink (5,000 Impressions)

Utah Low Cost New or Renewal Notary Bond Package Order Form:

Official Notary Journal:

Official Notary Public Journal (Soft Cover) ☐ **$5.00**

Select Your Notary Bond Package:

Basic Notary Bond Package "A" ☐ **$50.00**

Standard Notary Bond Package "B" ☐ **$96.00**

Deluxe Notary Bond Package "C" ☐ **$116.00**

Elite Notary Bond Package "D" ☐ **$141.00**

GRAND TOTAL AMOUNT: **$_____**

Form of Payment Options:

Please type or print the check or money order number below:
#_____

Payable to: Utah Notary "Discount" Association

OR

☐ Charge: ___Visa ___MasterCard ___AM/EX ___Discover

_____   _____
Credit Card Number   Expiration Date

X _____
Signature of Cardholder (Required for Credit Card Purchases)

Required Information:

Email:_____

Daytime Phone:_____

Name as Commissioned:_____

Commission Expiration Date:_____

Commission or Registration Number:_____

County or Parish Commissioned In:_____

UT-02   05/15