



NOTARYBONDING.COM

Tradition of Trust & Integrity Empowering America's Notaries Since 1940.



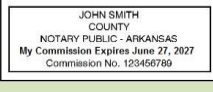
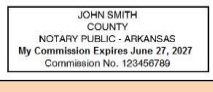
Arkansas Notary "Discount" Association Co.
550 Hulet Drive, Suite 105
Bloomfield Hills, MI 48302

Toll Free: 1-800-366-8279
Email: info@notarybonding.com

Fax: 1-800-637-5992
Website: notarybonding.com



Arkansas Notary "Discount" Association Co. Order Form:

Standard	Deluxe	Elite	Premium
Low Cost New or Renewal Notary Bond Package "A"	Low Cost New or Renewal Notary Bond Package "B"	Low Cost New or Renewal Notary Bond Package "C"	Low Cost New or Renewal Notary Bond Package "D"
\$ 38.00	\$ 54.00	\$ 65.00	\$ 81.00
Package Includes:	Package Includes:	Package Includes:	Package Includes:
Required \$ 7,500 Notary Public 10 Year Bond.	Required \$ 7,500 Notary Public 10 Year Bond.	Required \$ 7,500 Notary Public 10 Year Bond.	Required \$ 7,500 Notary Public 10 Year Bond.
\$ 5,000 Notary Errors & Omissions 10 Year Insurance Policy.	\$ 5,000 Notary Errors & Omissions 10 Year Insurance Policy.	\$ 10,000 Notary Errors & Omissions 10 Year Insurance Policy.	\$ 10,000 Notary Errors & Omissions 10 Year Insurance Policy.
	Official Self-Inking Rectangular Stamp Seal (5,000 Impressions).		Official Self-Inking Rectangular Stamp Seal (5,000 Impressions).
			
			

Select Your Notary Bond Package:

Standard	Notary Bond Package "A"	<input type="checkbox"/> \$ 38.00
Deluxe	Notary Bond Package "B"	<input type="checkbox"/> \$ 54.00
Elite	Notary Bond Package "C"	<input type="checkbox"/> \$ 65.00
Premium	Notary Bond Package "D"	<input type="checkbox"/> \$ 81.00

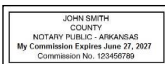
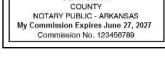

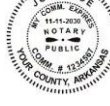
Official Notary Public Recording Journal:

Official Notary Public Journal (Soft Cover - 140 Entries)	<input type="checkbox"/> \$ 7.00
Official Notary Public Journal (Pink Soft Cover - 284 Entries)	<input type="checkbox"/> \$ 18.00
Official Notary Public Journal (Hard Cover - 400 Entries)	<input type="checkbox"/> \$ 25.00

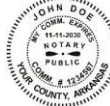
Additional Notary Errors & Omissions 10 Year Insurance Policy:

\$ 5,000 Notary Errors & Omissions 10 Year Policy	<input type="checkbox"/> \$ 62.50
\$ 10,000 Notary Errors & Omissions 10 Year Policy	<input type="checkbox"/> \$ 100.00
\$ 25,000 Notary Errors & Omissions 10 Year Policy	<input type="checkbox"/> \$ 150.00

Additional Official Stamp Seal:

 Self-Inking Rect. Stamp (5,000 Imp.) #205	<input type="checkbox"/> \$ 18.95
 Pre-Inked Rect. Stamp (25,000 Imp.) #206	<input type="checkbox"/> \$ 23.95
Xstamper Rect. Stamp (50,000 Imp.) #206-IS	<input type="checkbox"/> \$ 29.95
 Self-Inking Round Stamp (5,000 Imp.) #205-RSI	<input type="checkbox"/> \$ 20.95
 Pre-Inked Round Stamp (25,000 Imp.) #206-RPI	<input type="checkbox"/> \$ 26.95
Xstamper Round Stamp (50,000 Imp.) #206-RS	<input type="checkbox"/> \$ 34.95

Additional Notary Impression Official Seal Embosser:

 • Example shown is with an impression seal inker applied for faxing or photocopying.	
Seal Embosser (Hand Held / Chrome-Plated) #200	<input type="checkbox"/> \$ 22.00
Seal Embosser (Desk Top / Solid Steel) #197-S	<input type="checkbox"/> \$ 36.00
Additional Impression Seal Inkers:	
Standard Seal Inker (Pocket Style / 2,500 Imp.) #202-B	<input type="checkbox"/> \$ 13.00
Deluxe Seal Inker (Pre-Inked / 25,000 Imp.) #202-A	<input type="checkbox"/> \$ 18.00

Optional Express Arkansas Notary Bond Service:

Receive your required \$ 7,500 notary public bond and errors & omissions insurance policy via email within 24 hours of us receiving your order. Note: Other package items (if ordered) will be shipped separately. Excludes weekends and holidays. Thank you.

Express Arkansas Notary Bond Service ☐ **\$ 15.00**

Payment Options:

Indicate Check or Money Order Number: _____
Payable to: Arkansas Notary "Discount" Association Co.

Charge Credit Card:

☐ Visa ☐ MasterCard ☐ American Express ☐ Discover

Credit Card Number: _____

Credit Card Expiration Date: _____

X _____

Signature of Cardholder (Required for Credit Card Purchases)

Select Shipping Method:

Standard Shipping & Handling: ☐ **\$ 5.95**

FedEx Shipping options are ONLY for notary stamp(s) and/or notary seal(s). All other products if ordered will be shipped Standard mail. Allow up to 3 business days for your notary stamp(s) and/or notary seal(s) to be personalized and manufactured prior to shipping. Note: Weekends and holidays are not a business day. Delivery time is based on distance to the destination.

FedEx Ground Shipping - 1 to 5 business days: ☐ **\$ 13.95**

FedEx 3 Day Shipping - 3 business days: ☐ **\$ 17.95**

FedEx 2 Day Shipping - 2 business days: ☐ **\$ 18.95**

Order Total:

Grand Total Amount: \$ _____

Important Notice – Please Read:

• The mandatory Arkansas information form is to be completed on page 2.



Mandatory Arkansas Information Form:



NOTARYBONDING.COM

Tradition of Trust & Integrity Empowering America's Notaries Since 1940.

Mandatory: You must complete and return both the Arkansas low cost new or renewal notary bond package order form and this Arkansas information form to process your notary commission. Please type or print legibly on the forms. We strongly recommend that you double-check both forms before sending them to us. Thank you.

Print your name exactly as you wish to be commissioned:

County Commissioned In: _____

☐ New Notary

☐ Renewal Notary

If a Renewal Notary indicate your commission expiration date:

If a Renewal Notary indicate your commission number:

Daytime Phone: (_____) _____

Business Phone: (_____) _____

Email Address: _____

Please be advised that P.O. boxes are not accepted.

Residence Address: _____

Residence City: _____

Residence State: _____

Residence Zip Code: _____

(If applicable)

Shipping Address: _____

Shipping City: _____

Shipping State: _____

Shipping Zip Code: _____

*** Only Non-Residents of Arkansas complete this section below:**

* Please be advised that non-residents of the State of Arkansas must indicate their employer's name, employer's full address and employer's county. Please be advised that P.O. boxes are not accepted.

* Employer's Name: _____

* Employer's Address: _____

* Employer's City: _____

* Employer's State: _____

* Employer's Zip Code: _____

* Employer's County: _____