

## ARIZONA NOTARY "DISCOUNT" ASSOCIATION CO.

Corporate Mailing Address: 550 Hulet Drive, Suite 105, Bloomfield Hills, MI 48302

Phone: 1-800-366-8279
Phone: 1-800-3-NOTARY
Fax: 1-800-637-5992
Email: info@notarybonding.com



Email: info@notalybonding.com	New or Renewal	New or Renewal	New or Renewal	New or Renewal
	Basic Package	Standard Package	Deluxe Package	Elite Package
	\$25.00	\$63.00	\$83.00	\$103.00
INCLUDES: \$5,000 Notary Public 4 Year Bond.	X	X	X	X
Self-Inking Rectangular Seal Stamp.  INCLUDES: Official  JOHN SMITH NOTARY PUBLIC - ARIZONA MARICOPA COUNTY Commission # 123456 My Comm. Expires Jan 27, 2027		X	X	X
INCLUDES: \$5,000 Notary		Х		
Errors & Omissions 4 Year Policy.		Х		
INCLUDES: \$10,000 Notary Errors & Omissions 4 Year Policy.			X	
INCLUDES: \$20,000 Notary				V
Errors & Omissions 4 Year Policy.				X
SELECT A NEW OR RENEWAL NOTARY BOND PACKAGE   SELECT A SHIPPING METHOD				
\$25.00 Basic Package \$63.00 Standard Package \$83.00 Deluxe Package \$103.00 Elite Package				
\$8.00 Standard Shipping \$16.00 FedEx Ground \$20.00 FedEx 3 Day \$25.00 FedEx 2 Day \$37.00 UPS Next Day  Provide yourself with end-to-end product trackable shipping with FedEx or UPS. FedEx and UPS options are only for stamps and/or embossers.				
All other products will be shipped standard mail.				
ADDITIONAL NOTARY ERRORS & OMISSIONS 4 YEAR POLICY				
\$30.00 \$5,000 Notary E&O 4 Year Policy				
\$45.00 \$10,000 Notary E&O 4 Year Policy				
\$55.00 \$15,000 Notary E&O 4 Year Policy				
\$65.00 \$25,000 Notary E&O 4 Year Policy				
COMPLETE MANDATORY INFORMATION				
Name As Commissioned:				
New Notary				
Renewal Notary - Renewal Notary Indicate Your Commission Expiration Date (MM/DD/YYYY):				
Renewal Notary Indicate Your Commission Number:				
Daytime Phone:				
Email Address:				
Note: P.O. Boxes Are Not Accepted:  Residence Address:				
City: State: Zip Code: Residence County:				
*If Applicable:				
*Ship To Address:				
*Ship To City:		*Ship To State:	*Ship To Zip C	ode:
COMPLETE PAYMENT METHOD VIA CREDIT CARD OR CHECK				
Pay by Visa, MasterCard, American Express or Discover: Pay by Check:				
CC Number: Check Payable to: Arizona Notary "Discount" Association Co.				ount" Association Co.
CC Expiration Date (MM/YY):   _   _   _   _   _ Check Number:   _   _   _			III	
CVV Code:   _				
Cardholder Name:				
Signature of Cardholder: X TOTAL AMOUNT: \$				

