

KENTUCKY 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



	Basic (State at Large)	Standard (State at Large)	Deluxe (State at Large)	Elite (State at Large)
	Package	Package	Package	Package
	\$ 45.95	\$ 64.95	\$ 74.95	\$ 124.95
INCLUDES: \$ 1,000 Notary Public 4 Year Bond. Note: The Notary Public 4 Year Bond Amount Varies In Each County.	X	X	X	X
INCLUDES: Standard Shipping & Handling Of \$ 5.95.	X	X	X	X
INCLUDES: Toll Free Telephone & Email Support For Full 4 Year Term.	X	X	X	X
NCLUDES: Self-Inking Rectangular Seal Stamp. YOUR NOTARY NAME Notary Public - Commonwealth of Kentucky Commission Number KYNP 1234567 My Commission Expires Jan 31, 2027		X	X	X
INCLUDES: \$ 7,500 Notary E&O 4 Year Policy.	X	X		
INCLUDES: \$ 10,000 Notary E&O 4 Year Policy.			X	
INCLUDES: \$ 25,000 Notary E&O 4 Year Policy.				X
SELECT A NOTARY BOND PACKAGE				
\$ 45.95 Basic Package \$ 64.95 Standard Package \$ 74.95 Deluxe Package \$ 124.95 Elite Package				
ADDITIONAL NOTARY ERRORS & OMISSIONS 4 YEAR POLICY \$\begin{array}{c} \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \				
OPTIONAL TRACKABLE SHIPPING METHODS				
Provide yourself with end-to-end product trackable shipping. FedEx and UPS options are only for stamps and/or embossers. All other products will be shipped standard mail. Allow 1 to 3 business days for manufacturing and personalization. \$\Begin{align*} \frac{15.95}{24.95} \text{ FedEx 2 Day} \Begin{align*} \frac{36.95}{36.95} \text{ UPS Next Day} \end{align*}				
COMPLETE MANDATORY INFORMATION				
Name As Commissioned:				
New Notary Renewal Notary Indicate Your Commission Expiration Date (MM/DD/YYYY):				
Daytime Phone: Email Address: 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 Zip Code	<i>:</i>
COMPLETE PAYMENT METHOD VIA CREDIT CARD OR CHECK				
Pay by Visa, MasterCard, American Express or Discover: Pay by Check:				
Payable to Kentucky Notary "Discount" Association Co. Provide the Check Number: #				
Expiration Date (MM/YY):	ccv:			
Cardholder Name:				
Signature of Cardholder: X TOTAL AMOUNT: \$				









