



# Steps for the Notary Forms

***\* Make sure to fill out all forms correctly to avoid delay! \****

## **Step 1: Commission Application**

- Fill out form. At least the residential information is required.
- Sign "Applicant Signature" line at bottom right.
- Have this signature notarized.

## **Step 2: Western Surety Bond Form**

- Sign at the Principal "X" (arrow) in the middle of the form.
- Sign at the Oath "X" (arrow) at the bottom of the form.
- Have this signature notarized.

***\*Leave the top portion blank.\****

## **Step 3: Order Form**

- Supply the "Postal Shipping To" information for your supplies.
- Bottom Right: Mark items for order.

**If using a check/money order or credit card as payment, mail to**

**Stegall Notary Service**

**P.O. Box 12913**

**Jackson, MS 39236**

**Or credit card users can scan and email the forms to**

**[stegall@bellsouth.net](mailto:stegall@bellsouth.net)**

PHYSICAL ADDRESS:  
14 Northtown Drive  
Jackson, MS 39211

MAILING ADDRESS:  
P.O. Box 12913  
Jackson, MS 39236

PHONE:

**844.303.9505**  
**601.957.9505**



**Stegall NOTARY SERVICE**  
Serving Mississippi Notaries Since 1980

EMAIL: stegall@bellsouth.net WEB: www.StegallNotaryService.com

OWNER: Cooper D. Allen  
Licensed Insurance Agent

Proud to be  
MISSISSIPPI  
OWNED & OPERATED

## ORDER FORM for New or Renewal Commissions

### PLEASE FOLLOW THESE 3 STEPS:

*Note: Incomplete forms will be returned.*

- 1** **STEP 1: APPLICATION**
- 2** **STEP 2: BOND**
- 3** **STEP 3: ORDER FORM**

Complete Notary Application **AND** have signature **NOTARIZED**.

Sign "Principal" line at the "X", **and**  
Sign the Oath of Office at the "X", **and** have **NOTARIZED**.  
**DO NOT COMPLETE the TOP PORTION of the BOND.**

Mark all Items or Kit you wish to order below.  
Make check payable to **STEGALL NOTARY SERVICE**.

Return **Order Form, Application, Bond, and Check or Credit Card information** to:  
P.O. Box 12913, Jackson, MS 39236

**\$10,000**  
Errors & Omissions  
Insurance Policy  
**FREE** with each  
Bond Order!

#### POSTAL SHIPPING TO: PLEASE PRINT CLEARLY.

(We ship via U.S. Postal Service)

Name: \_\_\_\_\_ MS Driver's License No. \_\_\_\_\_  
Name of Business at Mailing Address (if any): \_\_\_\_\_ Bus./Daytime Phone: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Email Address: \_\_\_\_\_



#### STATE REGULATION:

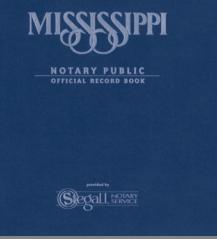
Effective July 1, 2007, the Secretary of State is requiring all **NEW & RENEWING** Notaries to use a **Self-Inking Seal Stamp** containing **Name, Residence County, Expiration Date** and **State issued ID Number**.

**Complete Notary Kit** ..... **\$178.00**  
total includes s&h

**TOTAL SAVINGS OF  
\$14.00**

#### INCLUDES:

- ★ Statewide Commission (4-year)
- ★ \$5000 4-year Surety Bond
- ★ State-Required Seal Stamp (self-inking)
- ★ MISSISSIPPI Notary Record Book
- ★ **\$25,000** Notary Errors & Omissions Insurance
- ★ Shipping & Handling



A Stegall Notary Service Exclusive!

#### MISSISSIPPI Notary Public Official Record Book

Beautiful navy blue faux-leather cover with gold embossed lettering. Offered exclusively by Stegall Notary Service.

INDIVIDUAL ITEM DESCRIPTION	UNIT PRICE	QTY.	TOTAL
1. * Notary Public Statewide Commission (4-year)	\$25.00		
2. * Notary Public Bond (\$5000, 4-year Surety) (Includes \$10,000 Errors & Omissions Insurance)	\$45.00		
3. * State-Required, Self-Inking Seal Stamp (see left) Shows Name, County, Expiration Date and Notary I.D. #	\$33.00		
4. * "Mississippi" Notary Official Record Book Required for new Notaries, but not for renewals with a book.	\$14.00		
<b>5. COMPLETE NOTARY KIT</b>	<b>\$168.00</b>		
6. Notary Public Errors & Omissions Insurance			
a. \$10,000 4-year Policy	\$50.00		
b. \$15,000 4-year Policy	\$65.00		
7. Notary Public Desk Plate			
a. Regular	\$16.00		
b. Personalized	\$22.00		
8. Jurat Stamp			
a. Rubber Stamp	\$14.00		
b. Self-Inking Stamp	\$25.00		
<b>* Required by Law</b>	<b>SUBTOTAL</b>		\$
Visit our website for pictures & descriptions <a href="http://www.StegallNotaryService.com">www.StegallNotaryService.com</a>	Shipping & Handling	\$ 10.00	
	<b>TOTAL REMITTANCE</b>		\$

Name on Credit Card: \_\_\_\_\_

Call for Credit Card Information

Credit Card No.: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

CVV No.: \_\_\_\_\_

**YOU COMPLETE 3 STEPS ABOVE, WE WILL HANDLE THE REST.**

We will obtain your Notary Commission, file your Bond with the Secretary of State and send all your notary supplies to you promptly.



# MISSISSIPPI SECRETARY OF STATE

Jackson, Mississippi

## NOTARY PUBLIC COMMISSION APPLICATION

This application must be typed or printed in ink. Fields marked with an asterisk (\*) are required.

\*This application is a    New Commission, or a    Re-Commission -->      Expiration date   /   /   .  
 (←----- check only one -----→)

Notary ID Number: \_\_\_\_\_  
 (Provided by Secretary of State)

\*I, \_\_\_\_\_, hereby make application for appointment to the office of Notary Public.  
 (Name exactly as you wish it to appear on your certificate. No nickname or alias.)

### RESIDENCE

\*Street Address: \_\_\_\_\_ \*City: \_\_\_\_\_ \*MS Zip: \_\_\_\_\_

\*Telephone Number: \_\_\_\_\_ \*MS Driver License #: \_\_\_\_\_  
 (Or non-driver state ID number)

\*County of Residence: \_\_\_\_\_ \*Date of Birth:   /   /    \*PIN: \_\_\_\_\_  
 (Last four digits of SSN)

Mailing address, if different: \_\_\_\_\_ City: \_\_\_\_\_ MS Zip: \_\_\_\_\_

\*E-mail address: \_\_\_\_\_

*Your commission will be emailed to you. No physical copy will be mailed.*

**NOTICE:** After filing with the Secretary of State's Office, this document is a public record. The personal information contained in this application is used by the Secretary of State to determine your eligibility for the Office of Notary Public.

**Please provide a business or employer address and telephone number as you would like it to appear in the online Notary Directory. If you do not provide this information you will be listed at your mailing or residence address.**

**BUSINESS** Name: \_\_\_\_\_ Job Title: \_\_\_\_\_ Phone: \_\_\_\_\_

Street Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Under penalty of perjury, I hereby certify that: I have read the instructions and the Notary Public Regulations and understand the qualifications for appointment to the Office of Notary Public; I am at least 18 years of age and I have never been convicted of a felony in this State or other state-nation and am not presently incarcerated or on parole; I have never had a denial, revocation, suspension, restriction, or resignation of a notarial commission in this State or any other state or nation; I can read and write the English language; I am a Citizen or other permanent legal resident of the United States; and I reside at the physical residential address provided on this application.

**I swear or affirm that the above information is true and correct.** \_\_\_\_\_ \* Applicant Signature

State of Mississippi, County of \_\_\_\_\_

Sworn to and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_.  
 \_\_\_\_\_

\*Notary Public

My Commission Expires: \_\_\_\_\_



14 Northtown Drive  
 Jackson, Mississippi 39211

(SEAL)

Mississippi



# Western Surety Company

## BOND AND OATH OF NOTARIES PUBLIC

KNOW ALL PERSONS BY THESE PRESENTS:

BOND No. \_\_\_\_\_

That we \_\_\_\_\_ as Principal,  
and WESTERN SURETY COMPANY, a corporation duly licensed to do business in the State of Mississippi, as Surety,  
are held and firmly bound unto the State of Mississippi in the penal sum of

\$5000

for the payment of which well and truly to be made, we, and each of us, bind ourselves, our and each of our heirs,  
executors and administrators jointly and severally, and firmly by these presents.

Dated: \_\_\_\_\_.

THE CONDITION OF THIS OBLIGATION IS SUCH, That whereas, the above bounden Principal was duly  
appointed to the office of Notary Public on: \_\_\_\_\_,  
for the term of four years from: \_\_\_\_\_.

NOW, THEREFORE, if the said Principal shall faithfully perform all the duties of said office during his continuance  
therein, then the above obligation to be void, otherwise to remain in full force and virtue.

PLEASE SIGN HERE



### Stegall Notary Service

P. O. Box 12913  
Jackson, MS 39236  
Phone: 1-601-957-9505  
**Mississippi License No.: 10362168**

X \_\_\_\_\_  
Principal

WESTERN SURETY COMPANY

By \_\_\_\_\_  
Attorney-in-Fact  
Mississippi License No. 7701000

### OATH OF OFFICE

STATE OF MISSISSIPPI  
County of \_\_\_\_\_ } ss

I, \_\_\_\_\_, do solemnly swear that I will faithfully support  
the Constitution of the United States and the Constitution of the State of Mississippi, and obey the laws thereof; that I  
am not disqualified from holding office of Notary Public; that I will faithfully discharge the duties of the office upon  
which I am about to enter. So help me God.

X \_\_\_\_\_  
PLEASE SIGN HERE  
and HAVE NOTARIZED

Sworn to and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

My commission expires

Notary Public

**Please have signature notarized before returning to Stegall Notary Service**