Form #2301 Rev. 01/2019

If renewing, mark this box:

Commission Expires:

Return To: American Association of Notaries, Inc. P.O. Box 630601 Houston, TX 77263

APPLICATION FOR APPOINTMENT AS TEXAS NOTARY PUBLIC

Identifying Information

Please Type or Print Legibly

Name to be used as notary public: (This is the name you will be required to sign when notarizing.)						Social Security No.:	
Last	First			Middle (not required)	Suffix	Required by TX Gov't Code §406	
Mailing Address: (Please notify the secretary of state of an addr			of state of an address	ess change within 10 days) TX		Residence County:	
Street	Sui	te or Apt. No.	City	State Zip			
Email <i>(Your c</i>	address for return of commission will come f	of commission (I from <u>notarypublic</u> e	_egible): commission@sos.stat	<u>e.tx.us</u> and you will NOT re	ceive mater	ials by mail.)	
Date of	f Birth: /	/ Dr	iver's License or Id	entification No.:		Issuing state:	
		<u>unt,</u> have never l	been convicted of a	ting To Qualification a felony or crime involvi <i>ject to a background chec</i>		turpitude, am at least 18 years	
□ A.	following for each statement of (i) the crime involving m o	guilty of a crime crime: (1) copies nature, circums oral turpitude OK	of court order and t tances, date, and lo R a FELONY disqu a	sentence, and papers pert cation, and (ii) whether t ulifies you from appointm	aining to r he case is ent as a n e	ting this option must attach the elease from probation; and (2) a on appeal.) {A conviction for a ptary public under Texas law.}	
B.	I have never been violations such as s		crime OR I have o	only been found guilty of	a Class C	misdemeanor, e.g. minor traffic	
That w duly lie success heirs, e	censed to do businessors in office, in the su	THESE PRESEN applicant, as a in the state of m of TEN THOU trators jointly and	(This space reserved for TS: principal, and Texas, are held and ISAND DOLLARS f	or the payment of which, we dition of this bond, the abo	vernor of trul vell and trul ve-named p	, as surety, a corporation the state of Texas and to his/her ly be made we bind ourselves, our rincipal shall faithfully perform all BER: <u>26443672N</u>	
Agenc	y Name: American	Assoc. of Notarie	es, Inc. Address:	8811 Westheimer, Suite	207 Houst	on, TX 77063	
Date:	12/28/2020 Kal S. Jabbarg Signature of authorized person for surety						
pay, con	ntributed, or promised t	o contribute any m	Stateme v swear (or affirm) that oney or thing of value	nt of Officer t I have not directly or indire e, or promised any public offi	ctly paid, of ce or emplo	fered, promised to yment for the giving or withholding chever the case may be, so help me	
and wit		e and correct and	the foregoing Statem that I am not disqualif	fied by law or any other rease		that the information provided in ding the office of notary public. I	
Date:							
		5	Signature of Applicat	nt (<i>sign in name given abo</i>	ve on line	#1 to be used as notary public)	