



Jesse White • Illinois Secretary of State  
**Resident Notary Public Application**

Type or Print Clearly

Commission Name (Printed name must be identical to signature in Oath.)		Male <input type="checkbox"/>	Female <input type="checkbox"/>
Last Name:	First Name:	Middle or Initial:	
Residence Address: (Street/route, City, ZIP)			County:
Mailing Address: (P.O. Box, Suite, Apt.)	Home phone:	Business phone:	
Name of Employer:			
Address of Employment: (Street, City, ZIP)			

Date of Birth: mm/dd/yyyy / /	Applying for: <input type="checkbox"/> New Commission <input type="checkbox"/> Renewal of Current Commission
Current Expiration Date:	Commission #: IF AVAILABLE
Has your name, address or county changed since your last commission? <input type="checkbox"/> Yes <input type="checkbox"/> No	
If yes, please give previous name: _____	
and/or address: _____	

**NOTARIAL OATH**  
State of Illinois County of \_\_\_\_\_

1. I am a U.S. citizen or an alien admitted for permanent residence.
2. I have been a resident of Illinois for at least 30 days.
3. I am at least age 18 years or older.
4. I have never been convicted of a felony.
5. I am able to read and write the English language.
6. I have never had a notary public commission revoked.

I, do solemnly affirm, under the penalty of perjury, that the answers to all statements on this application are true, complete and correct; that I have carefully read the notary law of this State; and that, if appointed and commissioned as a notary public, I will perform faithfully, to the best of my ability, all notarial acts in accordance with the law.

Signature of Applicant:  X  \_\_\_\_\_

Notary Public Signature:  X  \_\_\_\_\_  
(Applicant may not notarize own signature)

Witnessed  
and Affirmed this day \_\_\_\_\_ of \_\_\_\_\_ 20\_\_\_\_\_

**AFFIX  
SEAL**