NEBRASKA SECRETARY OF STATE

Business Services Division: Notary

1445 K St., 1301 State Capitol Bldg. P. O. Box 95104 * Lincoln, NE 68509 www.sos.ne.qov

Notary Public Request to Change Record

Please type or print legibly in black ink
Please return the form with the applicable fee to the address listed above.
\$30.00 fee for Name Change and no fee for address change.

Please print:							
Name as it appears on your commission:	ame as it appears on your commission: Date commission issued:						
Mark all boxes that apply:							
I would like to change my name on my notary public commission.							
I would like to change my mailing address, email or phone on file to the information below.							
Complete the following for change of address:							
New Home Address							
Street Address					Apartment/Unit #		
PO Box (if any)							
City	State				Zip		
Deme Phone E-mail Address (optional)							
New Business Address (Required for non-resident applicant, optional for resident applicant) Non-resident Notaries Public must submit the Evidence of Employment form if the work address is being changed.							
Company Name							
Street Address							
City	State				Zip		
Work Phone	Extension						
Complete the following for change of name: A bond under the new name must accompany this change form and a copy of the marriage certificate or court order.							
Applicant Information							
Last Name	First	First			M.I.		
Date of name change:	Changed	by:		Marriage		Court Order	
NOTARIAL OATH							
Your signature below will be used to verify your signature on other documents. You must sign consistently.							
State of County of, do solemnly (sw and complete to the best of my knowledge. X Applicant's Signature	ear), (affirm	ı) under penalty	of po	erjury, that the ar	nswers to all que	estions on this application are true	
Applicant's Signature Subscribed and (sworn)	(affirmed)	before me : this	s	day of (M	lonth)	, 20 (Year)	