APPLICATION FOR NOTARY PUBLIC COMMISSION

I. APPLICANT INFORMATION					
Name First/Middle/Last	Address	Phone	DOB	Sex	
<u> </u>		<u> </u>		<u> </u>	
	II. AFFIDAVIT				
Georgia,Cour	ity.				
•					
To the Honorable	, Clerk of	Sur	erior Court:		
I, the undersigned, in making this application for a Notary Public Commission, do hereby state that:					
	side at the address shown above OR I am a res ne State of Georgia in this county or am regula				
at the address shown above;					
 I am at least eighteen years old, and my age and sex are shown above; I am a United States citizen or I am a legal resident of the United States; 					
 I have an operating phone, the number is listed above; and I can read and write the English language. 					
5. I can read and write the English language	•				
I, the undersigned applicant, further state that I subm 17, Article 1, as amended, of the Official Code of Go any notary commission held by me and list below al violations:	eorgia Annotated. I list below all denials, revoc	cations, suspensions, res	trictions, or resign	nations of	

III. DECLARATION OF APPLICANT AND NOTARY PUBLIC

		IV. ENDORSEMENTS OF APPLICANT
A. Georgia,		County
named herein, w	ed, being 18 years of age	, Clerk of Superior Court: e or older and a legal resident of the stated county, believe the applicant for Notary Public Commission elf, to be a person of integrity, good moral character, and capable of performing notorial acts. I have known
1. Name of No	otary Applicant	
2. Endorser In	nformation	
a. Name		
b. Addres	s	
c. Phone N	Number	
d. Date		
e. Endorse	er Signature	
To the Honorable, the undersigned named herein, w		County
1. Name of No	otary Applicant	
2. Endorser In		L
a. Name		
b. Addres	s	
c. Phone N	Number	
d. Date		
e. Endors	er Signature	
	V. APPO	INTMENT OF NOTARY BY CLERK OF SUPERIOR COURT
a notary public,	it is hereby ordered that	tion of this applicant and it appearing that the above-named applicant has met the requirements to be appointed applicant is hereby appointed pursuant to O.C.G.A. section 45-17-2.4 a notary public for a four year term s/her taking and subscribing the oath prescribed by law.
Term	of Appointment	
Beginning		
Ending		Clerk/Deputy Clerk of Superior Court
		VI. OATH OF OFFICE
		County public commission, do solemnly swear/affirm that I will well and truly perform the duties of a notary public wear/affirm that I am not the holder of any public money belonging to the state and unaccounted for, so help
Date:		
		Signature of Applicant
		ывнише ој пррисин
Sworn and subs	cribed before me on the	date written.
Date:		-
		Clerk/Deputy Clerk of Superior Court
		VII. E-MAIL ADDRESS

Optional e-mail address to be displayed on the www.gsccca.org Notary Search: _