



State of Missouri

Denny Hoskins, Secretary of State

Commissions
PO Box 784, Jefferson City, MO 65102
Toll-Free (866) 223-6535 or (573) 751-2783

Application for Change of Employer Resident Notaries or Non-Resident Notaries (Same County of Employment)

(Application fee \$5)

Print or Type

1. Name _____ Date of Birth (MM/DD/YYYY) _____
(This name must appear as it is signed in #9)

2. Home Address _____
City _____ State _____ Zip Code _____

3. Previous Employer _____
Previous Address _____
City _____ State _____ Zip Code _____

4. New Employer _____
Address _____
City _____ State _____ Zip Code _____
(Resident)

5. County of Residence or place of regular business (St. Louis City Residents please specify City) _____

6. County of Employment (Non-Resident) _____

7. Daytime Phone Number _____

8. Commission Number _____

9. Signature and Email Address of Applicant (This signature must appear as it is typed or written in #1)

PAYMENT

\$5 Check or Money Order Enclosed (Payable to Secretary of State's Office) *Credit Card: Master Card Visa Discover American Express
*(\$1.25 convenience fee will apply)

NAME AS IT APPEARS ON CREDIT CARD _____

EXPIRATION DATE _____ CARD NUMBER (16 Digits) _____

CVV – SECURITY CODE FROM BACK OF CARD _____

BILLING ADDRESS FOR CARD WITH CORRECT ZIP CODE _____

SIGNATURE _____

Application Instructions

1. **Name** - You should print or type your name as you want it to appear on your commission certificate. You are required by law to use your full last name, while initials may be used for first and middle names.
Date of Birth - Please provide your birth date in numerals: month/day/year. This is to confirm that applicants are at least eighteen years of age.
2. **Residence Address** - Please provide the address at which you reside. If your mail goes to a post office box, please include a street address after the post office box number. Also give the city, state and zip code.
3. **Old Employer** – Provide name and address of previous employer.
4. **New Employer** – Provide name and address of new employer.
5. **County of Residence or Place of Regular Business** – Please indicate the county in which you legally reside or place of regular business. You are commissioned for the county in which you live or where your regular place of business is located. You are able to notarize anywhere in the state of Missouri as a Missouri resident. If you reside in St. Louis City, please put St. Louis City in the county blank.
6. **Non-Resident Notaries** - Please indicate the county in which you are employed.
7. **Daytime Phone** - You are requested to provide a phone number where we can reach you BETWEEN THE HOURS OF 8:00 a.m. and 5:00 p.m., should we need to verify information given on the application in order to prevent the delay of returning the form to you for verification.
8. **Commission Number** - Please provide your commission number if you were commissioned after August 28, 2004.
9. **Signature** - Complete the form by adding your signature in the same name style you indicated in # 1 on the application. The Secretary of State's Office can only accept original signatures - photocopied signatures will be rejected.