

Notary Public Bond Certificate

State of _____ | County of _____

Name of Notary: _____

**Commission
Number:** _____

Bond Number: _____

Amount of Bond: \$ _____

Effective Date: _____

Expiration Date: _____

Surety Company: _____

This certifies that the above-named Notary Public is duly bonded in accordance with the laws of the State and is authorized to perform Notarial acts for the period indicated herein.

**Authorized
Signature:** _____

Date: _____

Seal/Stamp (if required)