

Notary Public Change of Address Order Form

Instructions for Changing Your Address on your Notarial Commission

When changing Office of Record address:

Complete the Department of State Change of Address form and submit a photocopy and this completed order form to PAN, (we will forward the copy to the Secretary of the Commonwealth).

NOTE:

- If your current notary stamp contains a municipality and your municipality has changed, you need a new official stamp.
- If your new office is in a different county you need a new official stamp.

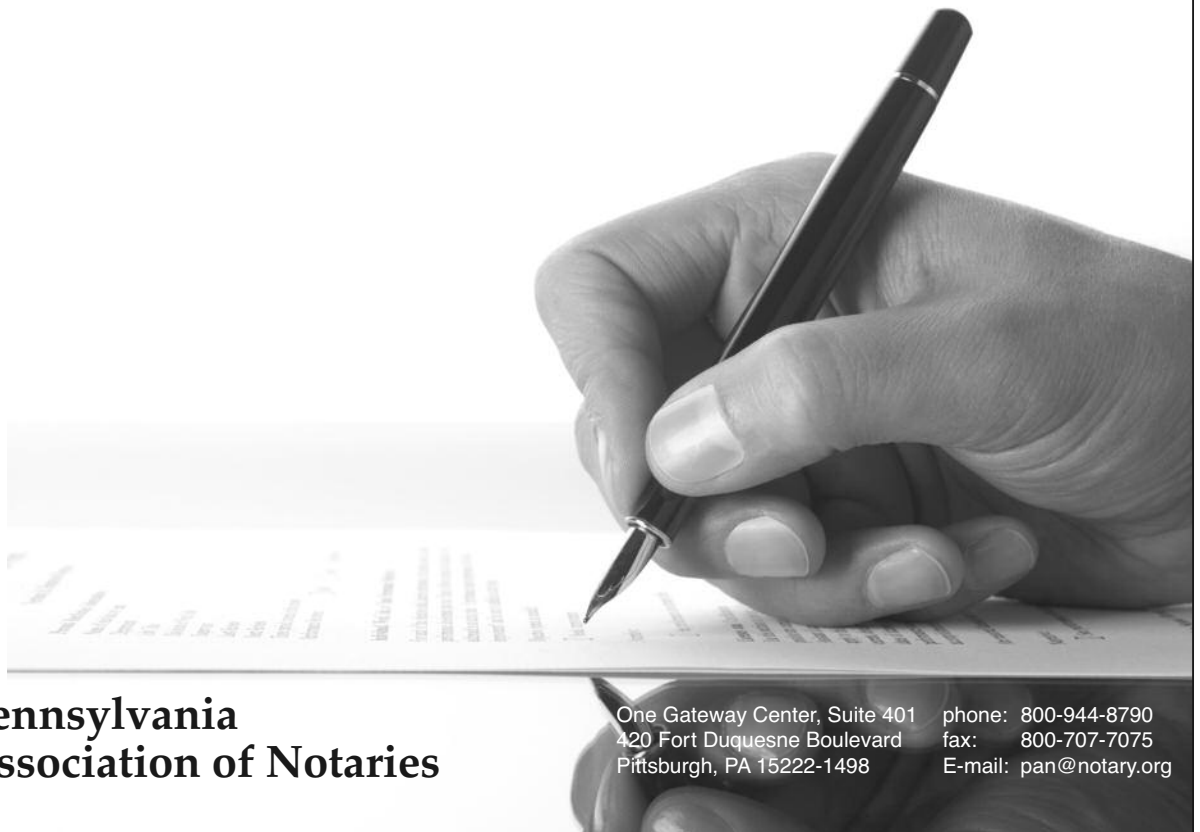
When moving outside of Pennsylvania:

If you move outside the state but retain a work address in the state, you may retain your commission. If you no longer live or work in the state, you must resign your commission. Your journal must be delivered to the recorder of deeds in your office of record county **within 30 days** of the resignation. You must also submit a Notary Public Resignation Form or letter of resignation and your commission to the Secretary of the Commonwealth.

CHECK ONE

- I have already sent a copy of the attached state form to the state.
- I authorize PAN to electronically transmit the information on the attached state form to the state for me.

Signature



**Pennsylvania
Association of Notaries**

One Gateway Center, Suite 401 phone: 800-944-8790
420 Fort Duquesne Boulevard fax: 800-707-7075
Pittsburgh, PA 15222-1498 E-mail: pan@notary.org

Notary Public Change of Address Order Form

PURCHASE YOUR NEW RUBBER STAMP SEAL.

Self-inking Notary StampPrice: \$15.95 \$ _____

Pocket Embossing SealPrice: \$21.95 \$ _____

Shipping & Handling \$ _____

Add 7% Sales Tax \$ _____

TOTAL AMOUNT DUE \$ _____

Choose Stamp Body Color:

- Blue Green Orange
 Pink Purple Red
 White Yellow



Shipping Address _____

City _____ State _____ ZIP _____

Shipping and Handling

Orders up to \$25.00	\$6.95	\$50.01 to \$75.00	\$12.95
\$25.01 to \$50.00	\$9.95	\$75.01 to \$150.00	\$16.95

PAYMENT INFORMATION:

Name _____ PAN Customer Number _____

Card Number _____

Name on Card _____

Expiration Date _____ Security Code* _____

Check enclosed, payable to "PAN"
(There is a \$25 charge on all returned checks)

Charge to my:
 Visa Discover MasterCard American Express

Card Holder's Billing Address _____

City _____ State _____ ZIP _____

* The security code is a three- or four-digit number printed on the signature panel on the back of your credit card.



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A notary public must notify the Department of State within 30 days of any change in the information on file with the Department, including the notary's office address, home address or email address. Such notice may be made in writing or by email and shall state the effective date of such change.

This form may be submitted online at www.notaries.pa.gov (link to "Notary Services" and then "Update Information").

Where a notary public moves the notary's office address to a different county, the notary must register the notary's official signature in the prothonotary's office of the new county within 30 days.

PRINT OR TYPE CLEARLY. FILL OUT FORM COMPLETELY. Do **not** leave any blanks. Use "none," "N/A" or cross out section if applicable. There is no fee for filing this form.

For Official Use Only

Notary commission expiration date	Notary commission ID number	Email address where you can be contacted about this form
Full name as commissioned	Date of birth (mm/dd/yyyy)	Effective date of address change (mm/mm/yyyy)

Office Address (place of employment or practice) currently on file with Department			
Employer/Business Name			
Employer/Business Street Address (P.O. Box alone is insufficient)	City	State	Zip Code
Employer/Business Telephone (include area code)		County	

New Office Address (NOTE: Office address information is a public record)			
Employer/Business Name			
Employer/Business Street Address (P.O. Box alone is insufficient)	City	State	Zip Code
Employer/Business Telephone (include area code)		County	

Home Address currently on file with Department			
Home Street Address (P.O. Box alone is insufficient)	City	State	Zip Code
Home Telephone (include area code)		County	

New Home Address			
Home Street Address (P.O. Box alone is insufficient)	City	State	Zip Code
Home Telephone (include area code)		County	

Email Address currently on file with Department	New Email Address

APPLICANT DECLARATION: I shall furnish additional evidence of these statements, if requested, which shall be satisfactory to the Department of State. To the best of my knowledge and belief, this filing contains no misrepresentations or falsifications, omission or concealments of material fact and the information given by me is true and complete. I understand that any false statement made is subject to the penalties of 18 Pa. C.S. § 4904 (relating to unsworn falsification to authorities) and may result in the suspension, revocation, or denial of my notary commission.

Notary Signature (must match name on commission) _____
Notary Printed Name (must match name on commission) _____

Date