

Please  
Do Not  
Staple

**NO**  
62-01

**KANSAS SECRETARY OF STATE**  
**Notary Public**  
**Appointment Form**  
Instructions

The following form **must be complete** and accompanied by **the correct filing fee** or the document will **not** be accepted for filing.

**IMPORTANT: You are not a notary until you receive your notary certificate at your residence from the Kansas Secretary of State. Do not submit the appointment form until 90 days prior to your expiration date. The appointment form must be submitted by mail.**

**A. Personal Information (Required before submitting) K.S.A. 53-102**

● <b>Filing fee</b>	Submit this form with the <b>\$25</b> filing fee for the notary appointment form.
● <b>Payment</b>	<p>Please submit payment by check, money order, or credit card. Checks and money orders need to be made payable to the Secretary of State. Forms received without the appropriate fee will not be accepted for filing. <b>Please do not send cash.</b></p> <p><b>NOTICE: There is a \$25 service fee for all checks returned by your financial institution.</b></p> <p>Visa, MasterCard, Discover, and American Express are accepted. To use a credit card, please provide the following information:</p> <p><b>Credit card number</b> _____</p> <p><b>Billing zip code</b> _____ <b>Expiration date</b> _____</p>
● <b>Appointment</b>	Mark if this is a new appointment or if this is for reappointment.
● <b>Applicant name</b>	The name must match exactly to the name printed on the notary stamp in field #7. Prefixes (Doctor, Father, Mrs.) are not acceptable. To use initials for the first name, you must submit a photo copy of a government-issued ID that shows an initial as a first name. We recommend that your name be listed as it is listed on your state-issued driver's license or identification card. <b>K.S.A. 53-105.</b>
● <b>Residential address</b>	Enter the street address of the residence of the applicant. This must be a physical street address – no post office boxes will be accepted. The notary certificate must be mailed to this address upon successful application. <b>K.S.A. 53-105a.</b>
● <b>Business address</b>	Enter the street address of the business where the applicant works. <b>(Optional)</b>
● <b>Seal/stamp impression</b>	Affix an impression of the notary stamp that the applicant will be using. If the applicant chooses to use more than one stamp, an impression of each must appear in the space provided. The applicant may either use a "seal press" (impression seal) with the impression to be blackened, or a rubber stamp to be used with permanent ink. The seal must include the applicant's name and the words "Notary Public" and "State of Kansas." "My appointment expires _____" also may be included. Do not include the county within the seal. Although you must obtain your seal or stamp before completing the appointment process, you will not be authorized to notarize documents until you receive your certificate of appointment from the Secretary of State. <i>The name on the stamp must match the name entered on the appointment form in field #1.</i> <b>K.S.A. 53-105.</b> Stamps can be obtained from most office supply stores.
● <b>Daytime phone</b>	Enter the applicant's daytime telephone number. <b>(Required)</b>
● <b>Secondary phone</b>	Enter the applicant's secondary telephone number. <b>(Optional)</b>
● <b>Expiration date</b>	Enter the expiration date of the applicant's last appointment if he or she is currently a Kansas notary public or has ever been a Kansas notary public.

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**B. Oath (Required before submitting) K.S.A. 53-102**

● <b>Signature</b>	The applicant must sign the appointment form after reciting the oath in the presence of a legally authorized notary public. The alternative affirmation in parentheses may be recited instead of the italicized commencement and conclusion of oaths. <b>K.S.A. 54-104.</b>
● <b>State/County</b>	The notary completing the oath (notarizing the applicant's signature) should complete the state and county in which the notarization takes place. <b>K.S.A. 53-508.</b>
● <b>Date administered</b>	The notary public who is notarizing the appointment form must complete the date the oath was administered. <b>K.S.A. 53-508.</b>
● <b>Notary's commission</b>	The notary public who is notarizing the appointment form must enter the date his or her notary commission expires. <b>K.S.A. 53-508.</b>
● <b>Notary's signature/seal</b>	The notary public who is notarizing the appointment form must sign the document and affix his or her notary seal in the space provided above his or her signature. <b>K.S.A. 53-508.</b>

**C. Notary Surety Bond (Required before submitting) K.S.A. 53-102**

● <b>Surety bond</b>	The law requires a notary public to be bonded in the sum of \$7,500 for a four (4) year period automatically coinciding with the appointment. The bond must be a commercial surety bond from an insurance company licensed to do business in Kansas. <b>The surety company must complete this section.</b>
● <b>Surety name &amp; address</b>	Enter the name and physical address of the commercial surety company.
● <b>Surety signature</b>	The signature should be completed by the Attorney-in-Fact from the insurance company and also the date he/she signed the bond. An insurance company must affix a corporate seal or attach its Power of Attorney.

**Additional Information:** Please review the [Kansas Notary Public Handbook](#) for information regarding Kansas notaries.

**For a change of name, home or business address, stamp, or cancelation of the commission bond, please file a form [NC](#).**

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**Kansas Office of the Secretary of State:**

Memorial Hall, 1st Floor (785) 296-4564  
120 S.W. 10th Avenue notary@ks.gov  
Topeka, KS 66612-1594 www.sos.ks.gov

THIS SPACE FOR OFFICE USE ONLY.

**Instructions: All information must be completed or this form will not be accepted.**

**IMPORTANT: You are not a notary until you receive your notary certificate at your residence from the Kansas Secretary of State. Do not submit the appointment form until 90 days prior to your expiration date. The appointment form must be submitted by mail.**

**A. Personal Information**

**Please check one:**

New appointment     Reappointment

**1. Applicant's name** (Must match name on the seal.)

**Previous name** (If your name has changed from the previous appointment.)

**2. Residential address** (P.O. box is not acceptable.)

Street Address  
City State Zip

**3. Business address** (Optional)

Street Address  
City State Zip

**4. Daytime phone** (Required)

**5. Secondary phone** (Optional)

**6. Expiration date of last Kansas appointment**

Month Day Year

**7. Affix an impression of applicant's seal/stamp**

**For reappointment only:**

**Your current commission expiration date must be used until after the date of expiration has passed.**



## B. Oath

I do solemnly *swear*\* (sincerely and truly declare and affirm) that I am a legal resident of the state of Kansas, or a resident of a bordering state who regularly carries on a business or profession or is regularly employed in the state of Kansas; that I am over the age of 18 years and am able to read and write the English language; that I will support the Constitutions of the United States and the state of Kansas; that I have not been convicted of a felony or had a professional license revoked; and that I will faithfully discharge the duties of the office of Notary Public according to the law. *So help me God*\* (And this I do under the pains and penalties of perjury).

### 8. Applicant's signature

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### 9. State of County of

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(Seal)

### 10. Signed and sworn (or affirmed) to before me on:

Month	Day	Year
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### 11. My appointment expires:

Month	Day	Year
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### 12. Notary's signature

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\* You may say the phrase inside the parentheses instead of the italicized words.

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## C. Notary Surety Bond (The surety company must complete this section)

Know All Persons By These Presents: That we, the above-named applicant as principal and

### 13. Name and address of surety company

Street Address		
City	State	Zip

as surety company, give bond payable to any individual who may be harmed as a result of a breach of duty by said applicant acting in his/her official capacity as notary public, in the amount of seven thousand five hundred dollars (\$7,500) as assurance for the due discharge of the duties of his/her office of notary public and we do bind ourselves, and each of our heirs, executors and administrators, jointly and severally. Applicant was, on the date of issuance of commission, bonded as a notary public in and for the state of Kansas, to hold office for the term of four years in accordance with the laws of this state. Now, therefore, if said applicant shall faithfully discharge the duties of the office of notary public, as prescribed by law, then this obligation shall be void. Further, we, the surety company, understand that we are required by K.S.A. 53-120 to report to the secretary of state the outcome on any claim filed on this bond.

### 14. Signature of Attorney-in-Fact

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(Corporate Seal)\*\*

### Date

Month	Day	Year
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\*\* Attach corporate seal or submit with the Power of Attorney.