

SALEM COUNTY CLERK 110 Fifth Street, Suite 200 - Salem, NJ 08079



NOTARY PUBLIC NAME AND/OR ADDRESS CHANGE

This statement must be filed whenever a Notary Public adopts a name and/or address change different from that which was used at the time of the commission was issued and BEFORE signing any document authorized or requested to be sign as a NOTARY PUBLIC.

IDENTIFICATION				
Notary ID #	Commis	sion Date	Expiration Date	
FULL NAME				
PREVIOUS NAME (IF A	PPLICABLE)			
CURRENT ADDRESS (INCLUDE COUNTY)			
Street	City	Zip	County	
PREVIOUS ADDRESS	(IF APPLICABLE)			
Street	City	Zip	County	
	С	ERTIFICATION		
I HEREBY CERTIFY IS TRUE AND CORRECT.	THAT THE FACTS LISTED A	BOVE ARE TRUE AND CO	DRRECT, AND THAT THE FOLLOWING SIG	NATURE
(SIGNATURE OF NOTAR	XY)		(DATE)	

Fee: \$15 made payable to: Salem County Clerk Mail To: 110 Fifth Street, Suite 200 - Salem, NJ 08079

STATE OF NEW JERSEY NOTARY PUBLIC NAME and/or ADDRESS CHANGE FORM

This statement must be filed whenever a NOTARY PUBLIC adopts a name and/or address change different from that which was used at the time the commission was issued and <u>BEFORE</u> signing any document authorized or requested to be sign as a NOTARY PUBLIC.

COMMISSION NO.	COMMISSION DATE	EXPIRATION DATE
PLI	EASE PRINT OR TYPE ALL INFORMAT	TON BELOW
	NEW FULL NAME OF NO	TARY
	PREVIOUS FULL NAME OF	NOTARY
	NEW ADDRESS OF NOTARY (INC.	LUDE COUNTY)
DDE	VIOUS ADDRESS OF NOTARY (INCLU	IDE COUNTY)
FNL	VIOUS ADDICESS OF NOTARY (INCLO	DE COUNTY
SET FORTH CIRCUMSTANCE MARRIAGE, DIVORCE, COUR		ICH NEW NAME WAS ADOPTED (I.E.
REASON		DATE
I HEREBY CERTIFY THAT THE PROVIDED BELOW IS TRUE	E ABOVE FACTS ARE TRUE AND (AND CORRECT.	CORRECT AND THE SIGNATURE
NAME	*	DATE

The statutory fee is \$25.00 for name changes. An address with duplicate commission is \$25.00, without a duplicate commission - NO FEE. Your cancelled check is your receipt.

ALL CHECKS SHOULD BE MAILED TO:

DIVISION OF REVENUE AND ENTERPRISE SERVICES NOTARY PUBLIC SECTION PO BOX 452 TRENTON, NJ 08646