Wyoming Notary Public Commission Application

Instructions: Type or print clearly, filling in all blanks. Incomplete or illegible forms may be returned.

Commission Name Style (type or print name to exactly match signature below) County of Residence					
3. Gender Male Female	4. Last Name		5. First Name		6. Middle Name
7. Residential A	ddress (street/route)	8. City		9. Zip Code	10. Home Phone
11. Mailing Address (where notary information will be mail				12. City	13. Zip Code
14. Name of Employer 15. Busine					15. Business Phone
16. Address of Employer				17. City	18. Zip Code
19. I am applying for: ☐ A new commission; or ☐ A renewal of my current commission. My current commission expiration date is:					
	ver been a Wyoming notary? ler the name of			_ in	County.
Certification: Please check all that apply, then sign (as shown in Item #1) and date the application. Certify that:					
	pplicant (must match Iten			Date	
Submit application) (make checks payable to "Secre n and filing fee to:	etary of Sta	ate")		

Notary Officer Secretary of State's Office State Capitol Building, 200 West 24th Street Cheyenne, WY 82002-0020 Ph. 307.777.5335