Mail completed form to:

Office of the Great Seal
7064 Crowner Drive

Lansing, MI 48918

Please submit payment if required



## MICHIGAN DEPARTMENT OF STATE OFFICE OF THE GREAT SEAL

Please check one:
☐ Information change – No Fee
Wallet Size Blue Certificate - \$10 fee
Wall Certificate - \$10 fee

## NOTARY REQUEST FOR DUPLICATE/NOTICE OF CHANGE

PLEASE **PRINT** OR **TYPE** INFORMATION REQUESTED

ORIGINAL INFORMATION (COMPLETE ALL SECTIONS)			
DRIVER'S LICENSE OR STATE ID #		ISSUING STATE	
NAME AS CURRENTLY COMMISSIONED			
MY CURRENT COMMISSION EXPIRATION DATE (MONTH/DAY/YEAR)			
EMAIL ADDRESS			
NEW INFORMATION (COMPLETE ONLY THOSE SECTIONS T	THAT ARE CHANGING)		
DRIVER'S LICENSE OR STATE ID #		ISSUING STATE	
FULL NAME (FIRST/MIDDLE/LAST) (MUST MATCH YOUR STATE DRIVER'S L	LICENSE OR ID CARD)		
NEW COMMISSION NAME (NAME AS IT WILL APPEAR ON DOCUMENTS YOU	U NOTARIZE)		
RESIDENCE ADDRESS	Сіту	STATE	ZIP
(Must match your Driver's License/ID card. Include PO Box, lot, and *Please note: A resident address change that results in a county ch		y of commission.	
Business Address	Сіту	STATE	ZIP
RESIDENCE TELEPHONE NUMBER	BUSINESS TELEPHONE N	lumber	
I understand that all information contained on this app Act, 1976 PA 442, MCL 15.231, et seq. <b>If I am a licer</b> <b>Bar of Michigan</b> .			
COMMISSION NAME			
SIGNATURE		DATE	