

STATE OF LOUISIANA  
SECRETARY OF STATE

TOM SCHEDLER  
SECRETARY OF STATE

Notary Division  
(225) 922-0507

Fax Numbers  
(225) 932-5359 Notary



**TRANSMITTAL INFORMATION  
For All Notary Filings**

Please indicate below payment and contact information

Check or Money Order Enclosed

Credit Card Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

\_\_\_\_\_  
Name of person filing document

\_\_\_\_\_  
Address

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip Code

\_\_\_\_\_  
Daytime phone number

\_\_\_\_\_  
Fax number

\_\_\_\_\_  
Email address

Mailing Address: P. O. Box 94125, Baton Rouge, LA \* 70804-9125  
Office Location: 8585 Archives Ave., Baton Rouge, LA \* 70809  
Web Site Address: [www.sos.la.gov](http://www.sos.la.gov)

**NOTARY PUBLIC EXAMINATION REGISTRATION**

**Instructions:** Complete this form in its entirety and send it along with the **Application to Qualify** to the Secretary of State's office. The **Examination Registration** fee is \$75 and the **Application to Qualify** fee is \$25. Both must be filed with the Secretary of State's office no later than 45 days prior to the date of the examination. Forms can be filed via mail, fax or email. The **Credit Card Cover Sheet** must accompany fax or email filings. **Make checks payable to Secretary of State.** **This registration and fee is non-refundable and non-transferable.** *The information on this form and the disposition of the examination is public record (except for your social security #).*

**Applicant's Parish of Residence:** \_\_\_\_\_

**Applicant's Name:** \_\_\_\_\_

**Applicant's Mailing Address:** \_\_\_\_\_  
\_\_\_\_\_ **zip:** \_\_\_\_\_

**Applicant's Phone Numbers:** *daytime:* ( ) \_\_\_\_\_ *home:* ( ) \_\_\_\_\_

**DOB** \_\_\_\_\_ **Applicant's Social Security #: (last 4 digits only)** \_\_\_\_\_

**Email Address** \_\_\_\_\_ **Examination Date:** \_\_\_\_\_

I elect to take the computer based format of the exam at LSU in Baton Rouge      **YES**      **NO**

I understand that this registration and fee is non-transferable and non-refundable.

**Applicant's Signature (required)** \_\_\_\_\_

**Applicant's Notary I.D. # (if applicable)** \_\_\_\_\_  
(Commissioned notaries **do not** have to file an Application to Qualify)

**(Check all that apply):**

Examination fee of \$75.00:     check     money order     cashier's check     credit card  
(cover sheet required)

Application fee of \$25.00:     check     money order     cashier's check     credit card  
(cover sheet required)

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**Date Approved by Secretary of State:**

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**Mail to: Secretary of State ● Notary Division ● P.O. Box 94125 ● Baton Rouge, LA 70804**  
**Physical Address: 8585 Archives Avenue ● Baton Rouge, LA ● 70809**  
**Email: [notaries@sos.la.gov](mailto:notaries@sos.la.gov) ● Fax: 225.932.5359**