Form 2306—General Information (Request for Duplicate Notary Public Commission)

The attached form is designed to meet minimal statutory filing requirements pursuant to the relevant code provisions. This form and the information provided are not substitutes for the advice and services of an attorney.

Commentary

Notary public commissions expire four years from the date of issuance. If a notary's commission is lost or destroyed before it expires, the notary may use this form to request a duplicate commission.

Instructions for Form

• **Identifying Information:** Enter the name under which your notary public commission was issued. Your social security number will be used only to maintain the accuracy of the secretary of state's records. The secretary of state will redact the social security number prior to providing a copy of this form in response to a public information request and will disclose the number only when required by law.

A document on file with the secretary of state is a public record subject to public access and disclosure. When providing address information, use a business or post office box address rather than a residence if privacy concerns are an issue.

- Request for Duplicate Commission: Select either A or B to indicate whether would like to receive your duplicate commission by mail or email. If you choose email, your commission will have an updated look and you will not receive materials in the mail.
- **Delivery Instructions:** The fee for a request for a duplicate commission is \$10. The completed form may be mailed to the Notary Public Unit, P.O. Box 13375, Austin, Texas 78711-3375; faxed to (512) 463-0873; or delivered to the James Earl Rudder Office Building, 1019 Brazos, Austin, Texas 78701. If a document is transmitted by fax, credit card information must accompany the transmission (Form 2101).

Revised 05/2011

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Form #2306 Rev. 05/2011

Submit to: SECRETARY OF STATE Statutory Documents Section P O Box 13375 Austin, TX 78711-3375 512-463-5705 512-463-0873 – Fax (include credit card information for payment (Form 2101)) THE OF SEXAS

This space reserved for office use

REQUEST FOR DUPLICATE NOTARY PUBLIC COMMISSION

Filing Fee: \$10			
	Identifying 1	Information	
Social Security No.:	OR Secretary of State Notary ID:		
Name:			
Last	First	Middle	Suffix
Commission Expires: ${mm/dd}$	/yyyy		
Please update my official	address in the secretary	of state's records. My curre	nt mailing address is: TX
Street	City Request for Dupli	County icate Commission	State Zip
My original notary public cor	nmission was lost, dest	royed, or stolen. I request a d	luplicate commission
A. to be sent to me at the	· ·		
OR	·	commission (you will not receive magnifications) in the secretary of state's rec	•
	Exec	ution	
Date:			
		Signature of Notary	
		Printed or typed name of Notary	

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