



STATE OF IDAHO NOTARY RESIGNATION FORM

Fees: No Charge

- CHECK ONE:** Resignation of my Idaho notary commission.
 Resignation of my authorization for electronic notarization.
 Resignation of electronic notary technology, specified below. (You no longer wish to use the specified electronic notary technology.)

Commission Number: _____
Find your commission number at: <http://www.sos.idaho.gov/NotarySearch/>

CURRENT COMMISSION NAME :			
Last Name:	First Name:	Middle Name or Initial (if used):	Suffix (Jr., Sr., ect.):

ELECTRONIC NOTARIZATION TECHNOLOGY INFORMATION: Only provide this information if you are resigning a specific electronic notary technology.

E-NOTARY SOFTWARE NAME: _____

EFFECTIVE DATE: Enter the date that you wish this resignation to be effective.

RESIGNATION DATE: _____

STATEMENT OF RESIGNATION: Sign this statement before a commissioned notary (not yourself).

I, _____, hereby wish to resign my notary commission, or a portion thereof, as specified in this form, on the effective date listed above.

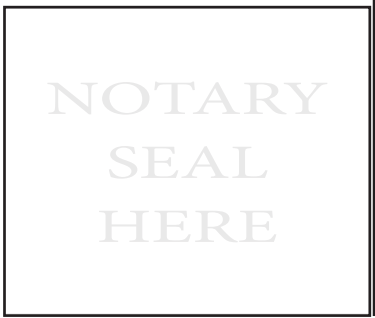
Applicant Signature: _____

State of Idaho)
County of _____)

Subscribed and sworn (or affirmed) before me
this ____ day of _____, 20__.

(Notary Public Signature)

My commission expires on _____, 20__.



This block for Secretary of State use only.
**DO NOT
STAMP, WRITE,
OR SIGN
IN THIS
AREA**