

Montana Secretary of State  
PO Box 202801  
Helena MT 59620-2801  
(406) 444-1877



**REQUEST FORM  
FOR  
REPLACEMENT OF NOTARY CERTIFICATE OF COMMISSION  
(Color with Foil Seal)**

**Fee: \$10.00**  
Enclose check or money order for the amount of **\$10.00** made payable to:  
**Secretary of State**

ENTER THE FOLLOWING INFORMATION:

\_\_\_\_\_  
Name

\_\_\_\_\_  
(Area Code) Phone Number

\_\_\_\_\_  
Address

\_\_\_\_\_  
City                      State                      Zip Code

\_\_\_\_\_  
Email Address

\_\_\_\_\_  
Commission Expiration Date

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Mail your request to:

SECRETARY OF STATE  
NOTARY AND CERTIFICATION SERVICES  
PO BOX 202801  
HELENA MT 59620

If you have any questions, please contact us at  
(406) 444-1877 or [sosnotary@mt.gov](mailto:sosnotary@mt.gov).