## **Notary E-mail Request**

Please fill out this form, sign it and return it via mail or fax to the Clerks' Authority.

Name: (as it appears on your commission)	
Street Address:	
E-mail Address:	
Commission Expiration Date: (required)	
County of Appointment:	
I hereby request that my e-mail address be included and displayed in the search results of the notary search on the Georgia Superior Court Clerks' Cooperative Authority website.	
Signature:	

Georgia Superior Court Clerks' Cooperative Authority 1875 Century Boulevard Suite 100 Atlanta GA 30345 Fax: 404-327-7877