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## NOTARY SERVICE REQUEST

CLIENT:	
Escrow No	Date
Company Name:	Contact Name:
Phone Number	Fax Number:
Signing: Date	Time
BORROWER:	
Name:	Indicate 1 or 2 sets of docs
Signing Location:	
Phone: Home ()	His Work ()
NOTARY:	
Name:	
ShippingAddress:	
Phone: () Cell: (	) Fax ()
Signing: Date	Timem.
COMPLETION REPORT (Notary must complete a	nd return no later than 8:30 a.m. the following business day):
Did borrower sign? Yes No 1s	t Trip 2nd Trip Indicate 1 or 2 sets of docs
Tracking No	UPS FedEx Other
Date Signed Comments	(Name)