

STATE OF LOUISIANA
SECRETARY OF STATE

Nancy Landry
SECRETARY OF STATE

Notary Division
(225) 925-4704

Fax Numbers
(225) 932-5359 Notary



**TRANSMITTAL INFORMATION
For All Notary Filings**

Name of person filing document

Address

City

State

Zip Code

Daytime phone number

Fax number

Email address

Mailing Address: P. O. Box 94125, Baton Rouge, LA * 70804-9125
Office Location: 8585 Archives Ave., Baton Rouge, LA * 70809
Web Site Address: www.sos.la.gov

RETIREMENT STATUS AFFIDAVIT

STATE OF LOUISIANA

PARISH OF _____

BEFORE ME, the undersigned personally came and appeared,

(Name of Affiant)

who, after being sworn, did depose and said that he/she reached the age of
seventy (70) years on _____, that he/she wishes to retire
his/her notary commission, and certifies that he/she will no longer exercise the
duties and functions of a notary.

Signature of Affiant

Sworn to and subscribed, before me this ____ day of _____, ____ .

Signature of Notary Public

Printed Name and ID# of Notary Public