The Governor's Office Notary Section Internet Complaint Form

Please carefully review this complaint form once you have included all information. You must include a copy of the improperly notarized document along with the complaint form.

Your Name:Address:		What is the name, commission number, and expiration date of the notary public that is the subject of this complaint?
COPY OF THE I	MPROPERLY NOTARIZ	DE FACTS OF ALLEGED MISCONDUCT AND A ZED DOCUMENT. (Please do not write on the back necessary. Must be typewritten or clearly printed .)
I affirm that I have 1	provided the above informati	on completely and truthfully to the best of my knowledge.
Signature		Date
RETURN TO:	OFFICE OF THE GOVE	ERNOR

NOTARY SECTION, 209 CAPITOL TALLAHASSEE, FL 32399-0001