



NOTARY JOURNAL ENTRY REQUEST FORM



Recorder-County Clerk
222 W. Hospitality Lane, 1st Floor
San Bernardino, CA 92415-0022
www.sbcountyarc.org
Phone: (855) 732-2575

Processing time..... 10 business days.

Requested By:

_____ (_____) _____
First Name *Last Name* *Phone Number*

_____ _____ _____ _____
Street Address *City* *State* *Zip Code*

_____ _____
Email Address

**All communications related to this request will be with the party listed above.*

Description of Record(s) Being Requested:

Notary Name	Commission Number	Commission Expiration	Comments	No. of Copies
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Requestor's Signature:		Date:	
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