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For Office Use Only

INTENT TO PERFORM TEMPORARY REMOTE ONLINE NOTARIZATION IN WYOMING

Current Commission Name Style: (how your name appears on your certificate and stamp)		Commission Expiration Date
Last Name	First Name	Middle Name
Physical Residential Address (Street, City, Zip Code)		
Mailing Address (Street/Box, City, Zip Code)		
Name and Address of Employer (Street, City, State, Zip Code)		
Personal Phone Number(s)	Business Phone Number(s)	
Personal Email Address(es)	Business Email Address(es)	
Name of Remote Online Notarization Software Provider as Approved by Contiguous States		

Certification:

Please check all, sign and date, and email this form, along with proof of training to notaries@wyo.gov.

I certify that:

- I have a current, active commission in the State of Wyoming.
- I will only perform remote online notarizations while temporary measures are in effect.
- I will only perform remote online notarizations while my commission is active.
- I understand commission renewal procedures while temporary measures are in effect remain the same.
- Any changes to my information above can be provided to the Secretary of State’s Office by email or mail.
- I have completed training from an online remote notarization provider as approved by a contiguous state.
- I have attached a copy of the training completion to be submitted with this notice of intent.
- I have read and understand the Guidance on Temporary Remote Online Notarization (Issued March 24, 2020) and any supplements or revisions that may be issued while temporary measures are in effect.

Signature of Notary

Date

March 24, 2020