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FRANK D. WILKES
DIRECTOR

STATE OF ALABAMA
DEPARTMENT OF VETERANS AFFAIRS

P.O. BOX 1509
MONTGOMERY, ALABAMA 36192-3701



September 5, 1991

Honorable Thomas A. Snowden, Judge of Probate
Shelby County Probate Office
Main Street
Columbiana, Alabama 35051

RE: Application for Notary Public State at Large

Dear Sir:

Enclosed you will find State warrant to cover the filing fee for Mr. Jimmy L. Mayhew, who is an employee of our department and, therefore, covered under the blanket bond for notaries the State has with The Hartford Insurance Company, policy #21 DDD KI0891.

Please issue a Notary Commission as soon as possible in accordance with the guidelines issued by the State Finance Department.

If you have any questions, please let me know.

Sincerely,

Frank D. Wilkes
Frank D. Wilkes,
Director

FDW/lg

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APPLICATION FOR APPOINTMENT AS NOTARY PUBLIC

(State-Wide Application Form For All Counties)

NAME: ~~MR~~ Jimmy L. Mayhew DATE: 23 August 1991
(Name as shown on voter registration)
HOME ADDRESS: P.O. Box 408 Columbiana, AL 35051
(City) (State) (Zip Code)
BUSINESS ADDRESS: P.O. Box 1035 Columbiana, AL 35051
(City) (State) (Zip Code)
PHONE: 669-7104 669-3835 SOCIAL SECURITY NUMBER: 423 28 0885
Home Business

TO: Thomas A. Snowden, Jr. JUDGE OF PROBATE
Shelby COUNTY

DEAR SIR:

I hereby make application for appointment-reappointment as:

1. Notary Public for the State at Large ☒
2. Notary Public for _____ County ☐

I am a qualified elector of Shelby County, AL. Age 63 Race White

I vote in Precinct/beat 1 Box 1 Last date registered to vote _____

Be sure you have the same address as shown on your voter registration so you will have the same precinct, beat or box number.

Yours very truly,

Jimmy L. Mayhew
(Signature of applicant)

My present commission expires on the

20th day of Oct, 1991

Applicant's printed name exactly as you wish to sign as a Notary Public.

The undersigned citizens of _____ County
recommend _____ of _____ County

as being a person of integrity and suitable to fill the office of Notary Public of this County.

NAME _____

ADDRESS _____
(Zip Code)

NAME _____

ADDRESS _____
(Zip Code)

NAME _____

ADDRESS _____
(Zip Code)

**REFERENCES NOT
REQUIRED FOR RENEWALS**

Note: The names of foregoing references must be signed by them individually not in the same handwriting nor filled out by the applicant.

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JUDGE OF PROBATE