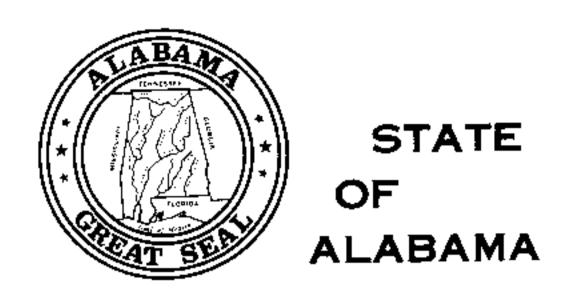
INDUSTRIAL RELATIONS BUILDING



649 MONROE STREET MONTGOMERY, ALABAMA 36131

DEPARTMENT OF INDUSTRIAL RELATIONS

February 8, 1995

Judge of Probate Shelby County

Dear Probate Judge Fuhrmeister:

This is to request a notary commission for Ms. Nelta Miller who is employed by the State of Alabama, Department of Industrial Relations and is covered under blanket bond (21-DDDKI0891) which the State provides. Ms. Miller is a registered voter and a resident of Shelby County.

Enclosed is a warrant to cover the filing fee and a completed application.

Please direct any questions and send all documents to Mrs. Debbie N. Causby, Finance Division, Room 228 at 242-8305.

Sincerely,

Dynan Abrams

Director of Finance

Enclosures:

Warrant #50240904 Application marchay 1995

Patricia Grego Filmicales

5x6 word 20. 1ddd

Inst # 1995-07683
03/24/1995-07683
03:40 PM CERTIFIED
SHELBY COUNTY JULGE OF PROBATE
002 SNA 17.00

APPLICATION FOR APPOINTMENT AS NOTARY PUBLIC

(State-Wide Application Form For All Counties)

NAME MRS VELTA W	MILLER	, 	DATE:	7-95
•	(Name as shown	on voter registration) PELHAM	Ac	35124
HOME ADDRESS: 108 TRUM	VING FIN WILL	(City)	(State)	(Zip Code)
BUSINESS ADDRESS: POBOX	610506	BHAM (City)	(State)	35 261-050 (Zip Code)
PHONE: 620-0837	836-1100 Business	SOCIAL SECURITY N	IUMBER:	
TO: PATRICIA YEASER:				
SHELBY	(COUNTY		
DEAR SIR:				
I hereby make application for	appointment-reappoint	ment as:		•
1. Notary Public for the	State at Large 🗵			
2. Notary Public for	Coun	ity 🗆		
I am a qualified elector of	lhy	County, AL. Ag		
I vote in Precinct/beat	Box		ate registered to vo	
Be sure you have the same address as show	wn on your voter registi	Yours fery truly, X X X X X X X X X X X X X	signature of ipplicant	elle elle
My present commission expires on the About day of MARCH, 1995	•	Applicant's	printed name a Notary Public.	exactly as you
The undersigned citizens of		<u> </u>		County
recommend		_ of		County
as being a person of integrity suitable	to fill the office of Not	ary Public of this County.		
NAME			·	
ADDRESS			<u> </u>	(Zip Code)
NAME	· · ·			
ADDRESS		t # 1995-0768		(Zip Code)
NAME				
ADDRESS	03	/24/1995-0768: 40 PM CERTIFII	3 E D	(Zip Code)
Note: The names of foregoing references applicant.	must be signed by	DOZ SHA	e same handwriti	ng nor filled out by the

applicant.