



**Texas Dept of Motor Vehicles**  
**Purchase Order # 60800 000002011**

Payment Terms: **NET30** Freight Terms: **FOB Destination** Ship Via: **US Mail** PCC: **0** Date: **12/10/15** PO Method: **IA** Dispatch: **Dispatch Via Print** Rev Dt:

**PLEASE NOTE: ADDITIONAL TERMS AND CONDITIONS ARE LISTED AT THE END OF THE PURCHASE ORDER.**

**Vendor:** SECRETARY OF STATE  
 PO BOX 13824  
 AUSTIN TX 787113824  
 United States

**Ship To:** 1P00  
 4000 Jackson Avenue  
 Austin TX 78731  
 United States

**Vendor ID:** 3307307307

**Purchaser:** Paula A Ramsey  
**Phone:** 512/465-4193  
**Fax:** 512/465-5641  
**Email:** Paula.Ramsey@TxDMV.gov

**Bill To:** 4000 Jackson Avenue  
 Austin TX 78731  
 United States

**Fax:**  
**Email:** DMV\_FIN-INVOICES@TxDMV.gov

**PO Information:**

Interagency Agreement Contract Act

TX Gov Code, Title 7, Chapter 771

**Payment:**

Payment will be made in accordance with the Texas Prompt Payment Act, TGC, Subtitle F, Chapter 2251. Vendor shall submit one copy of a correct itemized invoice showing the purchase order number, payee ID., remit to address, and phone number on invoice. Vendors may submit an electronic invoice. All electronic invoices shall be sent to DMV\_FIN-INVOICES@txdmv.gov (note: There is an underscore "\_" between DMV and FIN). All invoices received at the email address will be filed for future reference and you will receive a receipt confirmation email. To avoid the confusion of duplicate invoices, please do not send other copies of this invoice via regular mail, fax or other means. On emails for electronic invoices, include the company name (as it appears on the invoice) and the purchase order number in the subject line to assist in identifying and processing your invoices in a timely manner. TxDMV will not incur any penalty for late payment if payment is made in 30 days or less from receipt of goods or services and a correct invoice, which-ever is later.

Note: warrants will not be issued to a vendor without a current Texas Identification Number.

Line-Sch	Line Description	Class/Item	Quantity	UOM	Unit Price	Extended Amt	Due Date
1- 1	Notary Commission for Kristy Schultz for 4 years. RTI# 300300. Mail originals with warrant.	963/43	1.0000	EA	11.00000	11.00	12/18/2015
						<b>Schedule Total</b>	<input type="text" value="11.00"/>
						<b>ReqID:</b> 0000002144	
						<b>Item Total for Line # 1</b>	<input type="text" value="11.00"/>

**Authorized Signature**

*Paula Ramsey, CTM, CTM*

**12/10/2015**



**Texas Dept of Motor Vehicles**  
**Purchase Order # 60800 0000002011**

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Total PO Amount

All Shipments, Shipping papers, invoices and correspondence must be identified with our Purchase Order Number. Overshipments will not be accepted unless authorized by Buyer prior to Shipment.

**Terms and Conditions:**

Texas Department of Motor Vehicles Standard Terms and Conditions can be found at: <http://www.txdmv.gov/contractors-vendors>

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**Authorized Signature**

*Paula Ramsey; CTCM, CTAM*

**12/10/2015**



Submit to:  
STATE OFFICE OF RISK  
MANAGEMENT  
Bonds & Insurance Section  
P O Box 13777  
Austin, TX 78711-3777  
notary@sorm.state.tx.us  
Filing Fee: \$11



APPLICATION FOR APPOINTMENT AS  
TEXAS NOTARY PUBLIC—NO BOND

Identifying Information

Name to be used	Schultz	Kristy			Social Security No.:
as notary public: Last	<i>Last</i>	<i>First</i>	<i>Middle (optional)</i>	<i>Suffix</i>	463 - 55 - 7065
Mailing Address: Street	275 Black Forest Rd	Buda		TX	Residence County:
Agency Address: Street	4000 Jackson Ave	Austin		TX 78731	Hays

Email address for return of commission (print legibly) kristy.schultz@txdmv.gov

(Your commission will come from notarypubliccommission@sos.state.tx.us and you will NOT receive materials by mail.)

Alternate email address for return of commission (optional): schultzmom@gmail.com

Date of Birth: 04 / 17 / 1971 Driver's License or Identification No.: 007966375 Issuing State: TX

Statements Relating To Qualification

I, the above-named applicant, have never been convicted of a felony or crime involving moral turpitude, am at least 18 years of age and a legal resident of Texas. {All applications are subject to a background check.}

A. I have been found guilty of a crime other than a Class C misdemeanor. (Applicants selecting this option must attach the following for each crime: (1) copies of court order and sentence, and papers pertaining to release from probation; and (2) a statement of (i) the nature, circumstances, date, and location, and (ii) whether the case is on appeal.) {A conviction for a crime involving moral turpitude OR a FELONY disqualifies you from appointment as a notary public under Texas law.}

B. I have never been found guilty of a crime OR I have only been found guilty of a Class C misdemeanor, e.g. minor traffic violations such as speeding.

State Office of Risk Management Verification

THE STATE OFFICE OF RISK MANAGEMENT ("SORM") VERIFIES THAT:

The above-named applicant, an employee of \_\_\_\_\_, is authorized to be commissioned  
*Agency Name Code Number*

as a Texas notary public pursuant to § 653.012, Texas Government Code, without providing a notary public surety bond.

Date: \_\_\_\_\_

\_\_\_\_\_  
Signature of authorized person for SORM

\_\_\_\_\_  
Printed or typed name of authorized person for SORM

Statement of Officer

I, the above-named applicant, do solemnly swear (or affirm) that I have not directly or indirectly paid, offered, promised to pay, contributed, or promised to contribute any money or thing of value, or promised any public office or employment for the giving or withholding of a vote at the election at which I was elected or as a reward to secure my appointment or confirmation, whichever the case may be, so help me God.

Execution

I declare under penalty of perjury that the facts in the foregoing Statement of Officer are true. I further certify that the information provided in and with this Application is true and correct and that I am not disqualified by law or any other reason from holding the office of notary public.

Date: 12/04/15

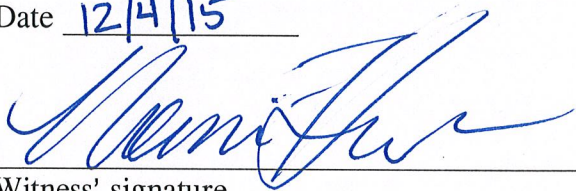
\_\_\_\_\_  
Signature of Applicant (sign in name given above on line #1 to be used as notary public)

**STATE EMPLOYEE NOTARY ACKNOWLEDGEMENT FORM**

I understand that the State of Texas will defend and indemnify state employees for damages, attorney fees and court costs adjudged against them when the damages are based on a negligent act or omission in the course and scope of the person's employment. I understand that the State's indemnification may not exceed \$100,000 and is subject to the limitations and exclusions provided in Tex. Civ. Prac. & Rem.Code Chapter 104.

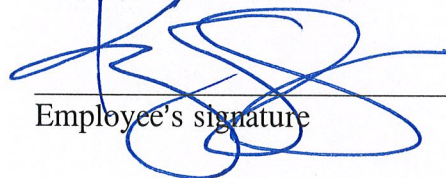
By signing this acknowledgement form, I recognize that I am liable for any and all costs, fees and expenses, including defense costs, as well as settlements and judgments resulting from the use of my notary commission outside the course and scope of my duties as a State of Texas employee.

Date 12/4/15



Witness' signature

Kristy Schultz  
Employee's name (Print)



Employee's signature