NEBRASKA SECRETARY OF STATE

Business Services Division: Notary 1201 N Street, Suite 120, Lincoln, NE 68508 P. O. Box 95104 * Lincoln, NE 68509 (402) 471-2558 http://www.sos.ne.gov

Evidence of Employment in Nebraska Form

This form must be completed for a non-resident applicant who is employed by a business located within the physical boundaries of Nebraska. The form must be completed by one of the officers, directors, managers, or authorized representatives of the business.				
	being fir	st duly sworn o	on oath say that	,
Name of Author	rized Representative]	Name of Notary Applicant
is employed as a(n)		for		, whose regular place of business
	Position of Notary Applicant		Name of Business	, whose regular place of business
is located within the phy	ysical boundaries of Nebraska.			
The applicant is apploy	and at the following location:			
The applicant is employed at the following location: Address of Business				S
Signature of Authorize	ed Representative		Title of Authorized Represent	ative
State of	County of			
Subscribed and sworn to	o before me this day of		, 20	
			Signature of Notary Officer	
My Commission expire	S	_,20		
,		,		
			Affix Notary Seal Here	ſ