

Space below for use of County Clerk

STATE OF CALIFORNIA  
COUNTY OF LOS ANGELES

FILING FEE \$200.00 + \$3.00 FOR EACH  
ADDITIONAL PAGE OF BOND

**COUNTY CLERK, COUNTY OF LOS ANGELES**

**CERTIFICATE OF REGISTRATION AS PROFESSIONAL PHOTOCOPIER  
(Individual, B & P C 22452(a))**

I, \_\_\_\_\_, declare that I have never been convicted of a felony;  
Full name of registrant

that I have resided in California for one year immediately preceding the date of filing of this certificate. I will perform the duties of a professional photocopier in compliance with the provisions of law governing the transmittal of confidential documentary information in this state.

I further declare that:

My date of birth is: \_\_\_\_\_ My age is: \_\_\_\_\_

My address is: \_\_\_\_\_

My telephone number is: ( ) \_\_\_\_\_

I declare under the penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on \_\_\_\_\_  
Date

at \_\_\_\_\_  
Place

\_\_\_\_\_  
Signature of registrant

Expiration Date \_\_\_\_\_ Registration Number \_\_\_\_\_

Bond Number \_\_\_\_\_ Registration Date \_\_\_\_\_

**CERTIFICATE OF REGISTRATION AS PROFESSIONAL PHOTOCOPIER  
INDIVIDUAL**

**Certificate of Registration as a Professional Photocopier continued.....**

Per Business and Professions Code, Section 22454, at least one person involved in the management of a professional photocopier shall be required to hold a current commission from the Secretary of the State as a notary public in this state.

Notary Name: \_\_\_\_\_

Notary Commission Number: \_\_\_\_\_

Notary Expiration Date: \_\_\_\_\_

County of Notary Registration: \_\_\_\_\_

**Each of the undersigned declares under penalty of perjury under the laws of the State of California that the forgoing is true and correct except for the personal information contained herein; and, as to that personal information, each declares under penalty of perjury under the laws of the State of California that it is true and correct only to the extent that it applies to him/her.**

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

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

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

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

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**FOR OFFICE USE ONLY**

REGISTRATION NUMBER: \_\_\_\_\_

REGISTRATION **AND** BOND EXPIRATION DATE: \_\_\_\_\_

(NOTE: TWO YEARS MINUS ONE DAY FROM EFFECTIVE DATE ON BOND.)