COMMISSIONER FOR WEST VIRGINIA RECORDING LOST OR STOLEN SEAL

Form CWV-4
Rev.07/2026

West Virginia Secretary of State
Licensing Division
Tel: (304)558-8000
Fax: (304)558-8381
Website: www.wvsos.gov
Email: notary@wvsos.gov

FILE ONE ORIGINAL
(Two if you want a filed stamped copy returned to you)

NO FEE

Notary ID#: _____

****** The undersigned agrees to conform with the Notary Laws as set forth in West Virginia Code §39-4-18(b) ******
as it pertains to commissioner name and/or address changes in West Virginia.

IMPORTANT - READ AND FOLLOW THE ATTACHED INSTRUCTIONS CAREFULLY BEFORE COMPLETING THIS APPLICATION TO AVOID IT BEING REJECTED AND RETURNED TO YOU FOR CORRECTION.

1. **Name of commissioner reporting LOST or STOLEN SEAL**: _____

2. **Check the box that applies to your situation**: ☐ **LOST seal** ☐ **STOLEN seal**

3. **Date** you first realized **your seal was LOST or STOLEN**: _____ (MM/DD/YYYY)

4. **Address Information**: (Enter the address recorded on your commissioner seal.)
   Street: _____
   City: _____ State: _____ Zip: _____

5. **Provide a brief description of how the seal was lost or stolen** (add additional pages, if necessary):
   _____
   _____
   _____
   _____

6. **Contact Name and Signature Information**:
   a. Contact Name (print): _____
   b. Contact Phone (w/ area code): _____
   c. **Signature**: _____ **Date**: _____ (MM/DD/YYYY)

Important Note: This form is a public document. Please **do NOT provide any personal identifiable information on this form** such as social security number, bank account numbers, credit card numbers, tax identification or driver's license numbers.

INSTRUCTIONS FOR FILING
COMMISSIONER FOR WEST VIRGINRECORDING LOST OR STOLEN SEAL

Complete all the sections of the application in accordance with West Virginia Code §39-4-18(b) and return to address below for filing with the West Virginia Secretary of State.

Section 1. **Name of commissioner reporting the LOST or STOLEN SEAL:** Enter the full name of the commissioner reporting the LOSS or THEFT of his/her commissioner seal.

Section 2. **Check the box that applies to your situation**: Check the appropriate box indicating the circumstance under which your commissioner seal became LOST or STOLEN.

Section 3. **Date you first realized your seal was LOST or STOLEN**: Enter the date (MM/DD/YYYY) you first realized your commissioner stamp/seal was LOST or STOLEN.

Section 4. **Address Information**: Enter the most recent address information (**Street, City, State and Zip Code**) for the commissioner as recorded with the West Virginia Secretary of State.

Section 5. **Provide a brief description of how the seal was lost or stolen**: Briefly describe how the stamp/seal was lost or stolen. Attach additional page(s), if necessary.

Section 6. **Contact Name and Signature Information:**

a. **Contact Name** – **PRINT** the contact name of the commissioner filing the requested change(s).
b. **Contact Phone** – Enter the phone number including the area code of the commissioner filing the requested change(s).
c. **Signature/Date** – The commissioner requesting the change(s) must SIGN and DATE the application. **If the application is NOT signed/dated, the application will be rejected and returned to the commissioner for correction.**

SUBMIT COMPLETED FILING TO ONE OF THE BUSINESS CENTERS BELOW:

Charleston Office
West Virginia Secretary of State
State Capitol Building
1900 Kanawha Blvd. East
Bldg. 1, Ste. 157-K
Charleston, WV 25305
Phone: (304) 558-8000
Fax: (304) 558-8381
Hours: Mon. - Fri. 8:30a - 5:00p EST

Clarksburg Office
North Central WV Business Center
153 West Main Street
Suite G- Third Floor
Clarksburg, WV 26301
Phone: (304) 367-2775
Fax: (304) 627-2243
Hours: Mon. -Fri. 9:00a - 5:00p EST

Martinsburg Office
Eastern Panhandle Business Center
229 E. Martin Street
Martinsburg, WV 25401
Phone: (304) 356-2654
Fax: (304) 260-4360
Hours: Mon. - Fri. 9:00a - 5:00p EST