



LAWRENCEVILLE

GEORGIA

MORE THAN 10 EMPLOYEES

By executing this affidavit, the undersigned private employer verifies that it is in compliance with O.C.G.A §36-60-6, stating affirmatively that the individual, firm or corporation employs more than 10 employees and has registered with and utilizes the federal work authorization program commonly known as E-Verify, or any subsequent replacement program, in accordance with the applicable provisions and deadlines established in O.C.G.A § 13-10-90. Furthermore, the undersigned private employer hereby attests that its federal work authorization user identification number and date of authorization are as follows:

Federal Work Authorization User Identification Number

Date of Authorization

Name of Private Employer

I hereby declare under penalty of perjury that the foregoing is true and correct.

Executed on _____, _____, 201____, in _____ (city) _____ (state)

Signature of Authorized Officer or Agent

Printed name and Title of Authorized Officer or Agent

Sworn to and subscribed before me this ____ day of

_____, 20____

Notary Public