

Security Administration (SSA).

STATE OF GEORGIA CITY OF GRIFFIN

SUPPLIER (E-VERIFY) AFFIDAVIT AND AGREEMENT

Please initial the appropriate statem sign and have notarized if applicable		e business relations with the City of Griffin,
A) My company provides product	s only for the City (no physical lat	oor or services).
B) I am a sole proprietor and have	ve no employees.	
C) My company is providing labo	r or services on a one-time basis t	that amounts to under \$2,500.00.
D) My company provides labor or is required).	r services to the City and I have s	upplied the EV number below (notarization below
BY: Authorized Officer or Agent	Printed Name	Date
Company / Contractor Name	Title of Authorized Officer	or Agent of Contractor
		that provide labor or services that could amount Verify number issued by Homeland Security AND
********	*******	********
NOTARIZATION RE	QUIRED FOR E-VERIF	Y NUMBER SUBMISSIONS:
COMES NOW before me, the undersigned duly sworn, states as follows:	officer duly authorized to administer of	paths, the undersigned contractor, who, after being
Department of Labor Rule 300-10-102, sta has registered with and is participating in a	iting affirmatively that the individual, federal work authorization program ir 1 and Georgia Department of Labor R	firm, or corporation which is contracting with the City in accordance with the applicability provisions and cule 300-10-102. Furthermore, the undersigned it the contract period.
physical performance of services pursuant to undersigned contractor will secure from suc Department of Labor Rule 300-10-102 thro Department of Labor Rule 300-10-108 or a	o the contract with the City of Griffin, h subcontractor(s) similar verification ough the subcontractor's execution of a substantially similar subcontractor a	tract with any subcontractor(s) in connection with the Georgia, of which this affidavit is a part, the of compliance with O.C.G.A. § 13-10-91 and Georgia the subcontractor affidavit required by Georgia ffidavit. The undersigned contractor further agrees to to the City at the time the subcontractor(s) is
EEV / (E-Verify # issued by Homeland Sec	urity IF checked above)	
Sworn to and subscribed before me		
This day of	_, 20	
Notary Public		
My commission expires:		
any equivalent federal work authorization prinformation of newly hired employees, pursueffective date of O.C.G.A. § 13-10-91, the a	rogram operated by the United States uant to the Immigration Reform and (pplicable federal work authorization p	ne United States Department of Homeland Security or Department of Homeland Security to verify Control Act of 1986 (!RCA), P.L. 99-603. As of the program is the "EEV <i>I</i> Basic Pilot Program" operated by Homeland Security, in conjunction with the Social