



Bartow County Government

Private Employer Affidavit of Compliance with the Federal Work Authorization Program Pursuant to O.C.G.A. § 36-60-6(d)

Form C: More than 10 employees

By executing this affidavit, the undersigned private employer verifies its compliance with O.C.G.A. § 36-60-6, stating affirmatively that the individual, firm or corporation named herein 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/Company

I hereby declare this statement to be true and correct under penalty of perjury.

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

Signature of Authorized Officer or Agent

Printed Name and Title of Person Executing Affidavit

For notary use only

Subscribed and sworn before

me on this the _____ day of _____, 20____

Notary Public

Date My Commission Expires

Seal