## **Security Immigration Compliance Form for Contractors**

Contractor Affidavit under O.C.G.A. § 13-10-91(b)(1)

By executing this affidavit, the undersigned contractor verifies its compliance with O.C.G.A. § 13-10-91, stating affirmatively that the individual, firm or corporation which is engaged in the physical performance of services on behalf of the Georgia Department of Human Services has registered with, is authorized to use and uses 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. § 13-10-91. Furthermore, the undersigned contractor will continue to use the federal work authorization program throughout the contract period and the undersigned contractor will contract for the physical performance of services in satisfaction of such contract only with subcontractors who present an affidavit to the contractor with the information required by O.C.G.A. § 13-10-91(b). Contractor hereby attests that its federal work authorization user identification number and date of authorization are as follows:

(This i	is a 4, 5, or (	6-digit number, also known as eVerify
Company ID)		
Federal Work Authorization User Identi	ification Nu	mber (Not Tax ID or SS Number)
Date of Authorization (This is the date system)	_ the Compan	ny ID was issued by the Federal eVerify
	Name of (	Contractor (Legal Name of Contractor, not
an abbreviated version)	_ Name of V	Contractor (Legii Name of Contractor, not
, , , , , , , , , , , , , , , , , , , ,		
Name of Project (or Service Provided, s	such as "DF	CS Client Services")
Department of Human Services		
Name of Public Employer		
1 2		
I hereby declare under penalty of perjur	y that the fo	regoing is true and correct.
Executed on,, 201 in	(city)	(ctata)
Executed oil,, 201 III	(city),	(State).
	Signature	of Authorized Officer or Agent
	_ 0	· ·
Printed Name and Title of Authorized C	officer or Ag	gent
SUBSCRIBED AND SWORN BEFOR	E ME	
ON THIS THE DAY OF		.201 .
		<u> </u>
	_	
NOTARY PUBLIC		
My Commission Expires:		

Clarified Version 1/5/2015-agb