STATE OF ALABAMA

COUNTY OF TALLADEGA

<u>AFFIDAVIT</u>

	fore me, the undersigned authority, personally appeared by me first duly sworn, doth depose and say as follows:	(affiant)
•		(business entity).
and with la	(name), on behalf of wful authority to act in its behalf, attest to the following from perso	onal knowledge:
1.	(business entity) does not knowingly employ, hire for employment, or continue to employ any unauthorized aliens in the State of Alabama: and	
2.	(business entity) is enrolled in the E-Verify Program as shown by the attached documentation.	
3.	(business entity) does and will utilize the E-Verify Program to verify the employment status of employees and potential employees according to federal rules and regulations.	
4.		
	Given under my hand and official seal of office this da	y of, 201
	Notary Public My Commission Expires:	