



CONTRACTOR E-VERIFY AFFIDAVIT

I hereby certify that DMD Consultants [insert contractor company name] does not employ, contract with, or subcontract with an unauthorized alien, and is otherwise in full compliance with, section 448.095, Florida Statutes.

All employees hired on or after January 1, 2021 have had their work authorization status verified through the E-Verify system.

A true and correct copy of DMD [insert contractor company name] proof of registration in the E-Verify system is attached to this Affidavit.

Print Name: David Durrua

Date: 2-3-2023

STATE OF FLORIDA TN

COUNTY OF Greene

The foregoing instrument was acknowledged before me by means of ☒ physical presence or ☐ online notarization, this 3rd (date) by David Durrua (name of officer or agent, title of officer or agent) of DMD Consultants (name of corporation acknowledging), a _____ (state or place of incorporation) corporation, on behalf of the corporation. He/she is personally known to me or has produced Personally Known (type of identification) as identification.

[Notary Seal] Notary Public

Lori A Fannon

Name typed, printed or stamped

My Commission Expires: 9-23-2026

