

CONTRACTOR E-VERIFY AFFIDAVIT

I hereby certify that	[insert contractor company name] does not employ,
	thorized alien, and is otherwise in full compliance with,
All employees hired on or after January 1, 2 through the E-Verify system.	2021 have had their work authorization status verified
A true and correct copy of in the E-Verify system is attached to this Af	[insert contractor company name] proof of registration fidavit.
Print Name:	
Date:	
STATE OF FLORIDA	
COUNTY OF	
notarization, this (date) by officer or agent) of (state or place of incorporation) corporatio	ed before me by means of physical presence or online name of officer or agent, title of name of corporation acknowledging), a n, on behalf of the corporation. He/she is personally known type of identification) as identification.
[Notary Seal] Notary Public	
Name typed, printed or stamped	
My Commission Expires:	