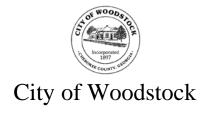


INSTRUCTIONS

CONTRACTOR AFFIDAVIT AND AGREEMENT

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 contracting with the City of Woodstock, Georgia (the "City") has registered with and is participating in a 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 subcontract 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:

E-Verify/Company ID Issued by the E-Veri	ify Program	4
Federal Work Authorization User Identification	ify Program n Number E-Verify d MPLETE FOLLO	AGE
Date E-Verify/Company ID was issued by	E-Verify	'CEL
Date of Authorization		MA
Contractor's Company/Firm Name	, , , 0	,,,,
Name of Contractor		
Name of project or type of service provided	d (E)	
Name of Project	OLE.	
City of Woodstock, Georgia	\mathcal{M}_{I}	
Name of Public Employer	<u>- </u>	
	he foregoing is true and co	orrect.
Signature of Authorized Officer or Agent		
Printed Name and Title of Authorized Officer	or Agent	
Subscribed and Sworn before me this the	day of	, 201,
Notary Public	My Commission Ex	——— pires



CONTRACTOR AFFIDAVIT AND AGREEMENT

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Federal Work Authorization User Identification	Number		
Date of Authorization			
Name of Contractor			
Name of Project			
Name of Public Employer			
I hereby declare under penalty of perjury that th	e foregoing is true ar	d correct.	
Executed on, 201 in _	((city),	(state)
Signature of Authorized Officer or Agent			
Printed Name and Title of Authorized Officer or	Agent		
Subscribed and Sworn before me this the	day of	, 201	,
Notary Public	My Commission	Expires	