AFFIDAVIT OF ALABAMA IMMIGRATION COMPLIANCE BY A CONTRACTOR OR GRANTEE TO A LOCAL SCHOOL BOARD IN THE STATE OF ALABAMA AND/ OR THE STATE BOARD OF EDUCATION

In compliance with SECTIONS 9 (a) and (b) BEASON-HAMMON ALABAMA TAXPAYER AND CITIZEN PROTECTION ACT (the "ACT"); CODE OF ALABAMA, SECTIONS 31-13-9

(a) and (b), this Affidavit of Alabama Immigration Compliance must be completed and signed by an officer or owner of a contractor or grantee and notarized, (if applicable) as a condition for the award of any contract by a local school board ("the Board") or by the Alabama Department of Education (ALSDE) to an employer that employs one or more employees in the State of Alabama and is a recipient of funds from the State of Alabama Department of Education, or funds from any political subdivision of the State of Alabama, or any public funded entity (including a local school board). Contractors and Grantees are to provide notice to their Subcontractors of their Alabama Immigration Compliance obligations. Please complete either Part I (if you do not employ one or more employees in the State of Alabama, if Part I completed, no notary required) or Part II (if you do employ one or more employees in the State of Alabama, if Part II completed a notary IS required).

PART I – COMPLETE IF YOU DO NOT EN	MPLOY ONE OR M	IORE EMPLOYEES IN ALABAMA
I certify as(Your position)	for	·
	, ,	(Name of contractor or grantee)
this Contractor or Grantee does not employ one	or more employees i	n the State of Alabama.
Signature of Affiant		Date
PART II – COMPLETE IF YOU DO EMPL	OY ONE OR MOR	E EMPLOYEES IN ALABAMA
State of Alabama: County of	:	
State of Alabama: County of	l	
		(Print name)
who, is duly authorized by the business entity/en	mployer which appea	ers below, being sworn, says as follows:
as		funded entity, I hereby attest that in my capacity
		(Name of contractor or grantee) cloyment, or continue to employ an unauthorized notice to its subcontractors of their Alabama
		Verity program and attached to this Affidavit is gram enrollment. I have read this Affidavit and
Signature of Affiant		Date
Sworn to and subscribed before me this	, day of	
I certify that the affiant is known (or made know	vn) to me to be the ide	entical party he or she claims to be.
Signature and Seal of Notary Public		Date

TO BE RETURNED TO THE COFFEE COUNTY BOARD OF EDUCATION