



CHILDREN'S BOARD OF HILLSBOROUGH COUNTY
AFFIDAVIT OF COMPLIANCE WITH SECTION 448.095, FLORIDA STATUTES
Employment Eligibility - E-Verify Provider Agencies- Section 17 General Terms and Conditions

Vendor/Agency Name \_\_\_\_\_

Agency Authorized Official \_\_\_\_\_

Agency Authorized Official Title \_\_\_\_\_

The above agency will comply with section 448.095, Florida Statutes E-Verify requirements as follows:

Effective January 1, 2021, it is the responsibility of the Vendor/Independent Contractor to register with and use the E-Verify system, to ensure compliance with E-Verify requirements, and will verify the work authorization status of all newly hired employees paid for with Children's Board of Hillsborough County funding as defined in section 448.095, Florida Statutes.

Effective January 1, 2021, it is the responsibility of the Vendor/Independent Contractor to ensure that all contractors and subcontractors performing work or providing services pursuant to the Independent Contract utilize the E-Verify system to verify the employment eligibility of all employees working for and hired by the subcontractor during the contract term.

For contracts entered into by the Vendor/Independent Contractor and third parties after January 1, 2021, the Vendor/Independent Contractor shall require any subcontractor to provide an annual affidavit that it has complied with section 448.095, Florida Statutes and such affidavits shall be made available to the Independent Contractor and/or the Children's Board upon request.

Pursuant to section 448.095, Florida Statutes, the Vendor/Independent Contractor will not employ, contract with, or subcontract with an unauthorized alien as it relates to services included in the contract with the Children's Board of Hillsborough County. I certify compliance with the above provisions under oath.

FURTHER AFFIANT SAYETH NOT: \_\_\_\_\_
[Signature]

\_\_\_\_\_
[Date]

The foregoing instrument was attested to before me this \_\_\_\_ day of \_\_\_\_\_, 2024, by \_\_\_\_\_, who is [ ] personally known to me or [ ] who has produced \_\_\_\_\_ as identification, and who did take an oath under penalty of perjury, and who appeared before me at the time of notarization.

Notary Public Sign: \_\_\_\_\_

Notary Public Print: \_\_\_\_\_

Seal:

Notary Public – State of Florida

Commission No.: \_\_\_\_\_

Commission Expires: \_\_\_\_\_