

TO: BEN HILL COUNTY BOARD OF COMMISSIONERS

RE: E-VERIFY PRIVATE EMPLOYER PROOF OF EXEMPTION

We are a private employer with less than 10 employees and are exempt from registration with and utilizing the federal work authorization program commonly known as E-Verify.

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Name of Company

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Signature of Authorized Officer or Agent

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Date

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Printed Name of Authorized Officer or Agent

SUBSCRIBED AND SWORN BEFORE ME

ON THIS THE \_\_\_\_\_ DAY OF \_\_\_\_\_, 20\_\_\_\_\_.

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NOTARY PUBLIC

My Commission Expires:

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