HEARD COUNTY COMMISSIONER

(Systematic Alien Verification for Entitlements)

Affidavit for a Public Benefit as required by the Georgia Security and Immigration Compliance Act

By executing this affidavit under oath, as an applicant for a public benefit as referenced in the Georgia Security and Immigration Compliance Act (O.C.G.A. § 50-36-1), I am stating the following: I am a United States citizen; or I am a legal permanent resident of the United States*; or ____I am an otherwise qualified alien or non-immigrant under the Federal Immigration and Nationality Act, 18 years of age or older and lawfully present in the United States. * *Alien registration number for non-citizens issued by the Department of Homeland Security or other federal immigration agency is:_____ Document for identification purposes must be provided See list on page 2 of this document. ************************* In making the above representation under oath, I understand that any person who knowingly and willfully makes a false, fictitious, or fraudulent statement or representation in an affidavit shall be guilty of a violation of Code Section 16-10-20 of the Official Code of Georgia. Applying on behalf/Name of associated business Signature of Applicant Date Printed Name SUBSCRIBED AND SWORN BEFORE ME ON THIS _____ DAY OF ______, 20_____. **Notary Public** My Commission Expires: