

**Affidavit Verifying Status
For County Public Benefit Application**

By executing this affidavit under oath, as a new employee with Lumpkin County and an applicant for the employee benefit package or other public benefit as referenced in O.C.G.A. Section 50-36-1, I am stating the following with the respect to my application for the employee benefits or other public benefit, I, _____.

(Name of natural person applying for benefit)

Circle One

1) _____ I am a United States citizen

OR

2) _____ I am a legal permanent resident 18 year of age or older 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. *

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.

Printed Name: Signature Date

Alien Registration Number for Non-Citizens: _____

***Note:** O.C.G.A. 50-36-1(e)(2) requires that aliens under the federal immigration and nationality Act, Title 8 U.S.C., as amended, provide their alien registration number. Because legal permanent residents are included in the federal definition of "alien", legal permanent residents must also provide their alien registration number. Qualified aliens that do not have an alien registration number may supply another identifying number below:

Other Identifying Number: _____

Affidavit

STATE OF GEORGIA, COUNTY OF LUMPKIN

Before me personally appeared the said _____
who says that he/she executed the above instrument of his/her own free will and accord, with full knowledge of the purpose thereof.

Sworn to and subscribed in my presence this _____ day of _____, 20_____.

Notary Public

My Commission Expires: _____