



State of Tennessee
Department of General Services
Purchasing Division
312 Rosa L. Parks Avenue
William R. Snodgrass TN Tower, 3rd Floor
Nashville, TN 37243-1102
Phone: 615-741-1035 Fax: 615-741-0684



Attestation Regarding Personnel Used in Contract Performance

Company Name:

Contract No:

Company Mailing Address:

Buyer:

Federal Employer Identification Number: _____
(or Social Security Number)

Company Contact Name: _____

Telephone Number of Contact: _____

Company Email Address: _____

The Contractor, identified above, does hereby attest, certify, warrant, and assure that the Contractor shall not knowingly utilize the services of an illegal immigrant in the performance of this Contract and shall not knowingly utilize services of any subcontractor who will utilize the services of an illegal immigrant in the performance of this Contract.

Affirmation: The Contractor acknowledges by signature that all information stated above is true and accurate and is no way misleading.

Authorized Signatory: I, _____ (**print name**), as a Principal or Officer of the Company, do certify, warrant and assure that I am empowered to contractually bind the Contractor.

Officer's Signature

Date

Title of Signatory