

SAVE Affidavit

Georgia Municipal Employees Benefit System (GMEBS) Life & Health



Verification of Applicant's Lawful Presence within the United States

As an Applicant for benefits administered by the Georgia Municipal Employees Benefit System (GMEBS),

I, _____ state the following under oath:
Print Applicant Name: First Middle Last

Select One: I am a United States citizen
 I am a legal permanent resident of the United States
 I am a qualified alien or non-immigrant under the Federal Immigration and Nationality Act with an alien number issued by the Department of Homeland Security or other federal immigration agency. **My alien registration number* issued by the Department of Homeland Security or other federal immigration agency is:**

_____.

I also hereby verify that I am 18 years of age or older

I have attached to this affidavit at least one secure and verifiable document included on the list [provided by the Attorney General](#). I understand that this affidavit will not be accepted unless this document is attached.

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 O.C.G.A. § 16-10-20, and face criminal penalties as allowed by such criminal statute.

Executed In (City, State):

Name of GMEBS City/Authority:

Applicant Signature:

Date of Signature (MM/DD/YYYY):

NOTARY PUBLIC ONLY

Subscribed and Sworn before me on (MM/DD/YYYY):

Notary Signature:

Commission Expiration (MM/DD/YYYY):

Notary Seal:

*Note: O.C.G.A. § 50-36-1(f)(1)(B)(ii) requires that qualified aliens or non-immigrants under the federal Immigration and Nationality Act, Title 8 U.S.C., as amended, provide their alien registration number.

Note to GMEBS Member Employer: This individual's application to enroll is not complete if the secure and verifiable document from the list approved and posted by the Attorney General pursuant to O.C.G.A. § 50-36-2(g), is not attached to this affidavit.