



Florida Department of Children and Families

Employment Screening Affidavit

CONTRACT NO.: LHZ91; LH834 DATED 06/29/20; 03/10/22

THE UNDERSIGNED VENDOR HEREBY ATTESTS IT IS IN COMPLIANCE WITH THE EMPLOYMENT SCREENING CLAUSE CONTAINED IN THE FLORIDA DEPARTMENT OF CHILDREN AND FAMILIES STANDARD INTEGRATED CONTRACT. ALL REQUIRED STAFF HAVE BEEN SCREENED OR THE VENDOR IS AWAITING THE RESULTS OF SCREENING.

VENDOR NAME: Pinellas Board of County Commissioners

Barry Burton (Print Name)

BY: _____ DATE: September 13, 2022
SIGNATURE OF AUTHORIZED REPRESENTATIVE

REPRESENTATIVE'S NAME/TITLE: Barry Burton, County Administrator
(Print Name/Title)

STATE OF Florida
COUNTY OF Pinellas

Sworn to (or affirmed) and subscribed before me this 13th day of September 2022 by

Barry Burton.



Jo Alejandra Lugo
Signature of Notary

[Check One] Personally Known _____ or Stamp Commissioned Name of Notary Public)
Produced the following I.D. _____

VENDOR NAME _____ FEIN# _____
VENDOR'S AUTHORIZED REPRESENTATIVE NAME AND TITLE _____
ADDRESS: _____
CITY, STATE, ZIP: _____
PHONE NUMBER: _____
EMAIL ADDRESS: _____

CORPORATE SEAL (IF APPLICABLE)

APPROVED AS TO FORM
By: Cody J. Ward
Office of the County Attorney