BUSINESS ENTITY CERTIFICATION, ENROLLMENT DOCUMENTATION, AND AFFIDAVIT OF WORK AUTHORIZATION

BUSINESS ENTITY CERTIFICATION:

The contractor must certify their current business status by completing either Box A or Box B or Box C on this Exhibit.

BOX A:	To be completed by a non-business entity as defined below.		
BOX B:	To be completed by a business entity who has not yet completed and submitted documentation		
	pertaining to the federal work authorization program as described at		
	http://www.dhs.gov/files/programs/gc_1185221678150.shtm.		
BOX C:	To be completed by a business entity who has current work authorization documentation on file with		
	a Missouri state agency including Division of Purchasing and Materials Management.		

Business entity, as defined in section 285.525, RSMo, pertaining to section 285.530, RSMo, is any person or group of persons performing or engaging in any activity, enterprise, profession, or occupation for gain, benefit, advantage, or livelihood. The term "business entity" shall include but not be limited to self-employed individuals, partnerships, corporations, contractors, and subcontractors. The term "business entity" shall include any business entity that possesses a business permit, license, or tax certificate issued by the state, any business entity that is exempt by law from obtaining such a business permit, and any business entity that is operating unlawfully without such a business permit. The term "business entity" shall not include a self-employed individual with no employees or entities utilizing the services of direct sellers as defined in subdivision (17) of subsection 12 of section 288.034, RSMo.

Note: Regarding governmental entities, business entity includes Missouri schools, Missouri universities (other than stated in Box C), out of state agencies, out of state schools, out of state universities, and political subdivisions. A business entity does not include Missouri state agencies and federal government entities.

BOX A – CURRENTLY NO	Γ A BUSINESS ENTITY			
I certify that (Company/Indiv definition of a business entity, as defined in section 285	ridual Name) DOES NOT CURRENTLY MEET the .525, RSMo pertaining to section 285.530, RSMo as			
stated above, because: (check the applicable business status that applies below) I am a self-employed individual with no employees; OR The company that I represent employs the services of direct sellers as defined in subdivision (17) of subsection 12 of section 288.034, RSMo.				
I certify that I am not an alien unlawfully present in the United States and if (Company/Individual Name) is awarded a contract for the services requested herein under <u>Child Care Health Consultation</u> (Contract Name) and if the business status changes during the life of the contract to become a business entity as defined in section 285.525, RSMo, pertaining to section 285.530, RSMo, then, prior to the performance of any services as a business entity,(Company/Individual Name) agrees to complete Box B, comply with the requirements stated in Box B and provide the Department of Health and Senior Services with all documentation required in Box B of this exhibit.				
Authorized Representative's Name (Please Print)	Authorized Representative's Signature			
Company Name (if applicable)	Date			

EXHIBIT 1, continued

(Complete the following if you DO NOT have the E-Verify documentation and a current Affidavit of Work Authorization already on file with the State of Missouri. If completing Box B, do not complete Box C.)

	BOX B – CURRENT BUSIN	NESS ENTITY STATUS			
I certify that (Business Entity Name) MEETS the definition of a business entity as defined in section 285.525, RSMo, pertaining to section 285.530.					
	orized Business Entity Representative's e (Please Print)	Authorized Business Entity Representative's Signature			
Busir	ness Entity Name	Date			
E-Mail Address					
As a business entity, the contractor must perform/provide each of the following. The contractor should check each to verify completion/submission of all of the following:					
	Enroll and participate in the E-Verify federal work authorization program (Website: http://www.dhs.gov/files/programs/gc_1185221678150.shtm ; Phone: 888-464-4218; Email: everify@dhs.gov) with respect to the employees hired after enrollment in the program who are proposed to work in connection with the services required herein; AND				
	Provide documentation affirming said company's/individual's enrollment and participation in the E-Verify federal work authorization program. Documentation shall include EITHER the E-Verify Employment Eligibility Verification page listing the contractor's name and company ID OR a page from the E-Verify Memorandum of Understanding (MOU) listing the contractor's name and the MOU signature page completed and signed, at minimum, by the contractor and the Department of Homeland Security – Verification Division. If the signature page of the MOU lists the contractor's name and company ID, then no additional pages of the MOU must be submitted; AND				
	Submit a completed, notarized Affidavit of Wo Exhibit.	ork Authorization provided on the next page of this			

EXHIBIT 1, continued

AFFIDAVIT OF WORK AUTHORIZATION:

The contractor who meets the section 285.525, the following Affidavit of Work Authorization.	RSMo, definition of a business entity must complete and return
Name) is enrolled and will continue to participate to employees hired after enrollment in the progrelated to contract(s) with the State of Missouri for subsection 2 of section 285.530, RSMo. I also af	(Name of Business Entity Authorized Representative) as a sworn on my oath, affirm
	are true and correct. (The undersigned understands that false e penalties provided under section 575.040, RSMo.)
Authorized Representative's Signature	Printed Name
Title	Date
E-Mail Address	E-Verify Company ID Number
Subscribed and sworn to before me this commissioned as a notary public within the Cou	inty of, State of
, and my commission (NAME OF STATE)	Date

EXHIBIT 1, continued

(Complete the following if you have the E-Verify documentation and a current Affidavit of Work Authorization already on file with the State of Missouri. If completing Box C, do not complete Box B.)

BOX C - AFFIDAVIT ON FILE - CUR	RENT BUSINESS ENTITY STATUS				
I certify that					
✓ The E-Verify Employment Eligibility Verification page OR a page from the E-Verify Memorandum of Understanding (MOU) listing the contractor's name and the MOU signature page completed and signed by the contractor and the Department of Homeland Security – Verification Division					
✓ A current, notarized Affidavit of Work Authorization (must be completed, signed, and notarized within the past twelve months).					
Name of Missouri State Agency or Public University* to Which Previous E-Verify Documentation Submitted: (*Public University includes the following five schools under chapter 34, RSMo: Harris-Stowe State University – St. Louis; Missouri Southern State University – Joplin; Missouri Western State University – St. Joseph; Northwest Missouri State University – Maryville; Southeast Missouri State University – Cape Girardeau.)					
Date of Previous E-Verify Documentation Submission:					
Previous Bid/Contract Number for Which Previous E-Verify Documentation Submitted: (if known)					
Authorized Business Entity Representative's Name (Please Print)	Authorized Business Entity Representative's Signature				
E-Verify MOU Company ID Number	E-Mail Address				
Business Entity Name	Date				
FOR STATE USE ONLY					
Documentation Verification Completed By:					
Buyer	Date				