

AFFIDAVIT OF NO COERCION

Before me, the undersigned authority, personally appeared _____,
whom after being duly sworn, deposes and states: (Print Affiant Name)

1. My name is _____ and I am over eighteen years of age. The following information is given from my own personal knowledge.
2. I am an officer or representative with _____, a non-governmental entity, and I am authorized to provide this affidavit on its behalf.
3. The nongovernmental entity, _____, does not use coercion for labor or services as defined in Section 787.06, Florida Statutes.
4. This declaration is made pursuant to Florida Statute 92.525. I understand that making a false statement in this declaration may subject me to criminal penalties.

Further Affiant sayeth naught.

Company: _____

Authorized Signature: _____ **Date:** _____

Printed Name: _____ **Title:** _____

STATE OF _____

COUNTY OF _____

The foregoing instrument was acknowledged before me by means of ___ physical presence, ___ digital notarization, or ___ on-line notarization this _____ day of _____, 20_____, by _____, as _____ on behalf of the company/corporation. They ___ are personally known to me or ___ have produced _____ as identification.

(Affix Notary Stamp or Seal)

Notary Public Signature

Print, Type or Stamp Name of Notary

My commission expires: _____