Affidavit

	Date:	/	/	(MM/DD/YYYY)
Affiant, cannot obtain written docume	, due to ntation of mutual termination	on of emplo	oyment.	
The foreign worker investigation employment, (MM/DD/YYYY). This affithe employment contract. At untrue.	•	, has resig ooth parties	_	ed to the termination of
Entity Name			[Ent	tity Seal]
Company Owner			[Co.	mpany Owner Seal]