



## Background Check Affidavit County-Affiliated Group

*www.KingWilliamREC.com*  
P.O. BOX 215, King William, VA 23086  
(804) 769-4981 or (804) 769-4923

As an officer of the below-named organization, I hereby swear and attest that I have complied with all aspects and intent of the King William County Background Check Policy. Every volunteer in my organization has conducted all of the required background checks and I hereby swear and attest that every volunteer currently assisting in the below-listed organization has passed the background check evaluation process established by King William County.

I understand that falsification of the above statement and/or failure to comply with these requirements may result in the removal of the organization from County-Affiliated status with King William County.

Organization Name: \_\_\_\_\_

Authorized Representative Name: \_\_\_\_\_ Title: \_\_\_\_\_

Authorized Representative Signature: \_\_\_\_\_ Date: \_\_\_\_\_