

Madison County Corporate Compliance

Governing Body Compliance Training Acknowledgement Form

- ✓ I acknowledge that I have viewed the Compliance training video on this date. I have been provided with the opportunity to ask any questions that I may have.
- ✓ I acknowledge that I have received and read a copy of the Compliance Plan and the Code of Conduct.
- ✓ I understand that I must comply with the Compliance Plan, the Code of Conduct, all laws, regulations, policies and procedures, and guidance provided.
- ✓ I understand that I must report any instances of possible violations of the Compliance Plan, the Code of Conduct, laws, regulations, and policies and procedures to a member of management or the Compliance Officer.
- ✓ I understand that Madison County maintains a hotline for confidential or anonymous reporting of possible violations of the Compliance Plan, the Code of Conduct, laws, regulations, and policies and procedures.
- ✓ I understand that my failure to comply with the Compliance Plan, the Code of Conduct, laws, regulations, and policies and procedures or to report possible violations may result in disciplinary action, up to and including termination.

Print Name _____ Title _____

Signature _____ Date _____

Send the completed acknowledgement form to:

Corporate Compliance Officer
PO Box 605
Wampsville, NY 13163
Attn: Eric Faisst

or

Fax: (315) 366-2697
Attn: Eric Faisst