

ANNUAL POLICY REVIEW ATTESTATION

Pursuant to Article V of the Tioga County Ethics Law, the undersigned does hereby attest that he/she has reviewed the Tioga County Ethics Policy #26; and has additionally reviewed the Work Place Violence Prevention and Discriminatory Harassment Policy #53 and the Comprehensive Information Security Policy – Policies, Procedures and Standards for Information Security #43 for the calendar year 2017. This attestation is to be completed and filed with the Board of Ethics, c/o the Tioga County Attorney, 56 Main Street, Owego, New York 13827, on/or/before **March 31, 2017**.

Dated: _____

Name (Please Print)

**County Department
or
Board Member of**

Signature