

## **ETHICS POLICY ACKNOWLEDGMENT FORM**

To be completed by voting location managers/precinct election officials/rovers/scouts/temporary election workers at the beginning of their appointment. The completed form is to be kept by the board of elections.

I \_\_\_\_\_ hereby acknowledge that I have received  
(Printed name of voting location manager/precinct election official/rover/scout)  
training from the board of elections regarding the secretary of state's ethics policy and Ohio ethics laws, that I will comply with the same, and that failure to comply with the ethics policy or Ohio ethics laws may serve as good and sufficient reason for my removal from my appointed position.

\_\_\_\_\_  
(Signature of voting location manager/precinct election official/  
rover/scout or temporary election worker)

\_\_\_\_\_  
(Date signed)