Compliance: Statement of Understanding

Contractor

I, ______________________________________, understand that the Mental Health Mental Retardation of Tarrant County Compliance Plan clearly states that all employees and contractors have a responsibility and obligation under the law to help maintain the highest level of ethical behavior and compliance. As such, I agree to the following:

(Initials beside each item indicate the undersigned understands and agrees fully to the conditions of that item.)

_______ I acknowledge that I have reviewed, read, understand and agree to abide by the MHMRTC Compliance Plan, as last revised March 25, 2008.

_______ I understand the importance of my role in supporting the Compliance Plan.

_______ I understand that any failure on my part as a Contractor to communicate a suspected or known compliance violation will be considered a failure to comply with the Compliance Plan and may result in termination of the contract.

_________________________  __________________________  ____________
Print Name                                Signature                               Date