## **Compliance: Statement of Understanding**

## Contractor

l,		, understand that	the Mental Health
employee help mair	s and contractors have	County Compliance Plan clear a responsibility and obligation of ethical behavior and compli	under the law to
		each item indicate the undersigned grees fully to the conditions of that item.)	
		I have reviewed, read, underst	
	I understand the imp Plan.	oortance of my role in supportin	g the Compliance
	communicate a sus	any failure on my part as spected or known compliance to comply with the Complian of the contract.	violation will be
P	Print Name	Signature	