



**Code of Ethics and Personal Responsibility  
Attestation**

I, \_\_\_\_\_, do hereby attest to the following:  
(print your name above)

1. I have been provided with a copy of Governor Crist's Code of Ethics and completed the Department of Health Code of Ethics presentation.
2. I understand that, by holding a position within state government, I have taken on the mantle of public service.
3. I am committed to maintaining an honest, ethical, and open system of government for the people of Florida.
4. I therefore pledge to honestly and faithfully comply with both the letter and spirit of this Code of Ethics, as well as the requirements set forth in Chapter 112, Part III, Florida Statutes, in the discharge of my duties and responsibilities as a public servant. As part of this commitment, I pledge to be on guard against and to avoid the appearance of impropriety in conducting the people's business.
5. I further pledge that, should questions regarding appropriate behavior arise, I will seek guidance from the appropriate person within the Office of the Governor or my agency on how to resolve the matter in question.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date