## **ETHICS CODE**

I have read and understand the provisions of The New Milford Ethics Code, Section 6B of the New Milford Code of Ordinances.

I understand that my failure to comply with the provisions of the Code may result in my removal from office or termination of employment.

| AGREED AND ACCEPTED: |
|----------------------|
|                      |
|                      |
| Name                 |
|                      |
| Signature            |
|                      |
| Date                 |