



LEWIS AND CLARK COUNTY POLICY STATEMENT OF UNDERSTANDING

I, _____, hereby acknowledge and declare that I
have read and understand Lewis and Clark County Policy 1.2.11, Drug and Alcohol Free
Workplace.

Signed: _____

Date: _____

Return signed form to Lewis and Clark County Human Resource Department, 316 N Park,
Helena, Montana 59623, for placement in your permanent personnel record.