



Associates of Vietnam Veterans of America, Inc.

POLICIES and PROCEDURES

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ACKNOWLEDGEMENT

I have read and understand the purpose of the Code of Ethics/Whistleblower Policy. I understand that strict adherence to this policy is a condition of my employment or elected/appointed position with AVVA. If I do not understand something regarding the Code of Ethics/Whistleblower Policy, I will contact the AVVA Secretary immediately for clarification. I agree to abide by AVVA's Code of Ethics/Whistleblower Policy.

Signature _____ Date _____

Name(please print) _____ Title _____