

CITY OF CORAL GABLES

Boards and Committees Ethics Training Attestation Form

Board/Committee Member's name: _____

Board/Committee Name: _____

Please indicate the date you completed the course electronically:

_____/_____/_____

I _____ attest and verify that I have completed the 2017 Boards and Committees Ethics Training Course electronically. I further attest and verify that all information provided in this form is accurate and complete in all respects.

Signature of Attester: _____

Date: _____

Please submit the completed form to epaulk@coralgables.com by December 22, 2017.
If you have any questions please call the City Attorney's Office at 305-460-5218.