

2014 Information Safeguard Training for People & Companies Contracting with Ohio Department of Taxation

Course Completion Sheet

Print Your Last Name (above)

Print Your First Name (above)

ACKNOWLEDGEMENT OF Information Safeguard Training

I understand the disclosure restrictions and responsibilities associated with my position as a contractor with the Ohio Department of Taxation. I have been informed and/or reminded of ODT's policy regarding taxpayer confidentiality and prohibition against divulging information. I completed the "Information Safeguard Training for People & Companies Contracting with the Ohio Department of Taxation". I have reviewed Internal Revenue Code Sections 7213, 7213A, 7431 and 6103 which specifically define and describe unauthorized disclosure and the felony criminal provisions applicable to contractors.

Signature _____ Date _____

After you complete this form, please give it to your ODT contact who will send the completed acknowledgement form to Organizational Development Division at the following address:

Organizational Development
4485 Northland Ridge Blvd., 1st floor
Columbus, OH 43229

Thank you for your help and cooperation.