

State of West Virginia DRUG FREE WORKPLACE CONFORMANCE AFFIDAVIT West Virginia Code §21-1D-5

I,		, after being first duly sworn, depose and state as follows:
1.	I am an employee of	; and, (Company Name)
2.	I do hereby attest that _	(Company Name)
	•	for a drug-free workplace policy and that such plan and with West Virginia Code §21-1D.
The	above statements are swo	rn to under the penalty of perjury.
		Printed Name:
		Signature:
		Title:
		Company Name:
		Date:
STA ⁻	TE OF WEST VIRGINIA,	
COU	NTY OF	, TO-WIT:
Take	en, subscribed and sworn t	o before me thisday of,
Ву С	Commission expires	
(Sea	al)	
		(Notary Public)