



CITY OF CORAL GABLES

2025 Boards and Committees Ethics Training Attestation Form

Board/Committee Member's Name: _____

Board/Committee Name: _____

Please indicate the date you completed the course: _____

I _____ attest and verify that I have completed the 2025 Boards and Committees Ethics Training Course electronically/in-person. 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 Friday, November 28, 2025.