EXHIBIT A

KERN COUNTY SHERIFF'S DEPARTMENT

EMPLOYEE STATEMENT FORM

As an employee of the Kern County Sheriff's Department you may have access to confidential information on individuals including, but not limited to; criminal records, Department of Motor Vehicle records, and law enforcement data which is controlled by statute and Departmental policy. Any misuse of such data or the authority to retrieve it may adversely affect an individual's civil rights and is a violation of the law.

Penal Code Section 502 prescribes felony and misdemeanor penalties relating to computer crimes.

Penal Code Section 11105 and 13300 identify who has access to criminal history information and under what circumstances it may be released. Penal Code Sections 11140-11144 and 13301-13305 prescribe penalties for misuse of criminal history information. Government Code Section 6200 prescribes the felony penalties for misuse of public record and CLETS information. Penal Code Sections 11142 and 13303 state:

> *"Any person authorized by law to receive a record or information obtained from a record who knowingly furnishes the record or information to a person not authorized by law to receive the record or information is guilty of a misdemeanor."*

California Vehicle Code Section 1808.45 prescribes the penalties relating to misuse of Department of Motor Vehicles record information.

Kern County Sheriff's Department Policies and Procedures Section J-1610 governs the use of computer systems and data.

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I have read the above paragraph and understand the policy regarding misuse of law enforcement data.

Signed _____

Date 10/11/07

Print Name DAVID HUBBARD

Social Security Number [redacted]

I, the undersi[illegible]d County employee, licensee, [illegible]iant, or other, hereby acknowledge receipt of a copy of the four page Connelly asbestos Notice to Employees on the date appearing next to my signature below.

Dated 4|5|07

Signature

David Hubbard

Print Name

[X] Check if County Employee

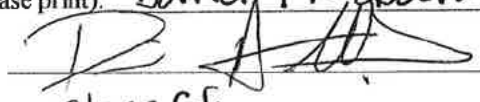
GSS 580 1151 395-5700 (11/93)

Acknowledgment of Kern County Electronic Communications Usage Policy

I have received a copy of and am fully aware of Kern County's Electronic Communications Usage Policy, and I agree to abide by the terms of this policy. I understand that I should have no expectation of privacy in any matter created, received or sent using the County's electronic communications systems. I understand that my violation of this policy may result in disciplinary actions being taken against me, and may constitute a criminal offense. Should I commit any violation, my access privileges may be revoked and/or appropriate legal/disciplinary action may be taken. I also agree to remain apprised of future revisions to this policy and to abide by the terms of all such revisions.

A copy of this policy and signed acknowledgment will be placed in the departmental personnel folder of Kern County employees or with the executed contract for the contractor or vendor.

Employee Name (please print): David Hubbard

Employee Signature: 

Department: Sheriff

Date: 4/5/07

Policy Effective Date: July 23, 2002

Acknowledgement of Kern County
Nepotism Policy

I have received a copy of the Kern County Nepotism Policy.

David Hubbard
Employee Name

4/5/07
Date

Employee Signature

Sheriff
Department Assigned

EXHIBIT A

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I have read the above paragraph and understand the policy regarding misuse of law enforcement data.

Signed _____

Date 4/5/07

Print Name David Hubbard

Social Security Number [redacted]

RECEIPT FOR SEXUAL HARASSMENT POLICY
NOTICE TO EMPLOYEES

I, THE UNDERSIGNED County employee, hereby acknowledge receipt of a copy of the County's Sexual Harassment Policy, Chapter I, Exhibit B, of the County Administrative Procedures Manual, on the date appearing next to my signature below.

Dated 4/5/07

Signature

David Hubbard

Print Name

Kern County Sheriff's Office

Authorization for Release of Employee Personal Address Information

In order to communicate current and correct mailing information to the following list of Kern County Sheriff's Associations, I give my permission for the Kern County Sheriff's Human Resources Division to release my current address information to the following association(s), as checked below:

- ☑ Kern County Sheriff's Benefit Association
- ☐ ~~Kern County Sheriff's Command Association (KCSCA)~~
- ☑ Kern Law Enforcement Association (KLEA)
- ☐ ~~Kern County Detention Officers Association (KCDOA)~~
- ☐ None of the above. I do not wish for my personal address information to be shared.

(NOTE: For those employees who are current members of CCAPE, the County Personnel Department currently updates address information on a bi-weekly basis per their M.O.U.)

This form will be filled in the Employee's Personnel File for reference. Only addresses of employees that have this signed release form will be shared with the above indicated association(s).

Revocation of this service must be in written form and submitted to the Sheriff's Human Resources Division.

David Hubbard
Print Name

Employee Signature

4/5/07
Date

EXHIBIT A

KERN COUNTY SHERIFF'S DEPARTMENT
EMPLOYEE STATEMENT FORM

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I have read the above paragraph and understand the policy regarding misuse of law enforcement data.

Signed D. Hubbard Date 7/10/04

Name David Hubbard Social Security Number [redacted]

EXHIBIT A

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I have read the above paragraph and understand the policy regarding misuse of law enforcement data.

Signed David Hubbard Date 7/12/04

Print Name David Hubbard Social Security Number [redacted]

RECEIPT FOR CONNELLY ASBESTOS

NOTICE TO EMPLOYEES

I, the undersigned County employee, licensee, tenant, or other, hereby acknowledge receipt of a copy of the four page Connelly Asbestos Notice to Employees on the date appearing next to my signature below.

Dated 9/11/06

Signature

DAVID HUBBARD

Print Name

[X] Check if County Employee

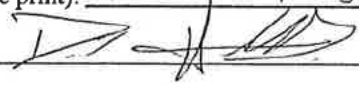
GSS 580 1151 395-5700 (11/93) (Volunteer)

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This signed acknowledgment of the employee receiving and reading this policy will be placed in the departmental personnel folder of employee or with the executed contract for the contractor or vendor.

Employee Name (please print): DAVID HUBBARD

Employee Signature: 

Department: KERN COUNTY SHERIFF DEPARTMENT

Date: 9/11/06

Policy Effective Date: July 23, 2002

RECEIPT FOR SEXUAL HARASSMENT POLICY
NOTICE TO EMPLOYEES

I, THE UNDERSIGNED County employee, hereby acknowledge receipt of a copy of the County's Sexual Harassment Policy, Chapter 1, Exhibit D, of the County Administrative Procedures Manual, on the date appearing next to my signature below.

Dated 9/11/06

Signature

DAVID HUBBARD

Print Name