



## Rotochopper Tobacco Affidavit Form

I \_\_\_\_\_, certify that I am tobacco free and have not used any  
(Employee's Name)

form of tobacco (cigarettes, chewing tobacco, snuff, e-cigarettes, cigars) within the last 6 months

in any amount (including occasional social use).

Employee Signature: \_\_\_\_\_ Date: \_\_\_\_\_