

SAMPLE OF FORM HUD-70029, SECURITY TERMINATION STATEMENT

**Security Termination
Statement**U.S. Department of Housing
and Urban Development
Office of Inspector General

1. I _____ (print full name), have been informed that my access to classified information, granted by the Department of Housing and Urban Development, is being terminated effective this date.
2. I further understand that I have a continuing obligation and responsibility to protect all classified information which came into my possession or knowledge as a result of my employment with the Department of Housing and Urban Development.
3. I have been reminded and am aware that any unauthorized disclosure of classified information by me may constitute a violation or violations of United States criminal laws, including Title 18, U.S. Code, "Crimes and Criminal Procedure," which prescribes penalties for such disclosures.
4. I hereby certify that no classified information remains in my possession, and that I have not removed any such information from the Department of Housing and Urban Development, or other United States control channels.

Date Access Terminated

Signature of Employee

Printed Name of Witness

Signature of Witness

Forward the completed original of this form to: Assistant Director for Security
Office of Inspector General, Room 8270
451 Seventh Street, S.W.
Washington, D.C. 20410

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