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TERMINATION SECRECY AGREEMENT

1. I acknowledge that by virtue of my duties I have been exposed to or the recipient of classified information, which, in itself, or by the implications drawn from it, is highly sensitive and its unauthorized disclosure or negligent handling could adversely affect the interests of the United States. I am aware that the unauthorized disclosure of classified information is prohibited by the Espionage Laws (18 U.S.C., Sections 793, 794 and 798) and that a violation of these laws may subject me to prosecution by the U. S. Government.

2. I hereby reaffirm my pledge that I will never publish or reveal by any means such information. I agree further that I do not now, nor will I ever, possess any right, interest, title or claim whatsoever to such information. I recognize the full and vested property right of the United States in such matters.

3. I certify that I have surrendered and no longer have in my possession or custody any classified information or material acquired as a result of this association.

4. I further acknowledge and agree that I have a continuing individual responsibility to the United States Government for the protection of such information and that the termination from this relationship with my employer and/or the United States Government does not relieve me of my obligations under this oath or any other previously executed Secrecy Agreements. I understand that I will not be relieved of these obligations except when specifically advised in writing by the sponsoring activity of the U. S. Government.

5. I understand that this oath may be retained by the U. S. Government for its future use in any manner within the scope of this oath.

6. I take this obligation freely, without any mental reservation or purpose of evasion and in the absence of duress.

NAME OF WITNESS (Type or Print)	NAME (Type or Print)
	David A. Phillips
SIGNATURE OF WITNESS	SIGNATURE
REMARKS PORT -3	NAME & ADDRESS OF AFFILIATION
	DATE

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