Insert County Logo/Header Here

\*insert date\*

Kentucky Emergency Management

100 Minuteman Parkway

Frankfort, KY, 40601

Mr. Russell Cole,

I, \*insert EM Director Name\*, \*insert county name\* County Emergency Management Director, certify the \*insert county name\* County Emergency Operations Plan has been reviewed per KRS 39 for the current fiscal year and no changes have been made at this time other than administrative changes.

If you have any questions or comments you can reach me at \*insert phone number\* or by email at \*insert email address\*.

Sincerely,

\*sign here\*

\*insert EM Director Name\*

EM Director, \*insert county name\* County Emergency Management