

**THANK YOU FOR
FOLLOWING OUR
SMOKE FREE POLICY OF
NOT SMOKING WITHIN _____
FEET OF OUR BUILDING.**



**THANK YOU
FOR NOT
SMOKING**

GRACIAS



POR NO FUMAR

**GRACIAS POR CUMPLIR
CON NUESTRO
REGLAMENTO “LIBRES
DEL HUMO DEL TABACO”
PROHIBIDO FUMAR HASTA
UNA DISTANCIA DE MAS
DE _____ PIES (_____ metros)
DEL EDIFICIO.**



Tobacco Free Platte & Colfax Counties

402-563-9656



Public Health
Prevent. Promote. Protect.

**EAST-CENTRAL DISTRICT
Health Department**

PLATTE, COLFAX, BOONE & NANCE

Better Health Through Partnerships

