



Novanta Inc.
SUPPLIER CODE OF CONDUCT

Supplier Certification Form

Supplier Name: _____

Supplier Address: _____

Supplier Contact Name: _____

Supplier Telephone: _____

Supplier Email Address: _____

By signing my name below I certify that I have the authority to sign this certification on behalf of the Supplier named above. I have read the current version of the Novanta Supplier Code of Conduct and confirm that the Supplier agrees to adhere to the policy.

Signature

Print Name

Title

Date