

Certification

I declare to the best of my knowledge and belief that the attached document(s) are true electronic copies of the executed collective negotiations agreement(s) and the included summary is an accurate assessment of the collective bargaining agreement for the term beginning 1/1/21 thru 12/31/24.

Employer: Hopewell Twp Fire District #1
County: Mercer
Date: 10/3/22
Name: Sarah Ocicki
Print Name
Title: QPA
SO
Signature