

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 7.1.11 thru 6.30.14

Employer: Dennis Township School District
County: Cape May
Date: 10-16-2024
Name: Teri J. Weeks
Print Name
Title: School Business Administrator
Teri Weeks
Signature