Certification

| I declare to the best of my knowledge and bel | ief that the attach | ed document(s) are tr | ue electronic copies of the |
|---|---------------------|-----------------------|----------------------------------|
| executed collective negotiations agreement(s) | and the included | summary is an accur | ate assessment of the collective |
| bargaining agreement for the term beginning | 1/1/2019 | _ thru _ 12/31/2022 | |
| | | | |

| Employer: | CITY OF CLIFTON |
|-----------|-------------------|
| County: | Passaic |
| Date: | 10/1/2021 |
| Name: | DOUGLAS JOHNSON |
| | Print Name |
| Title: | PERSONNEL OFFICER |
| | |
| | Signature |