

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 7/1/2023 thru 6/30/2026.

Employer: North Wildwood School District

County: Cape May

Date: 10/7/2024

Name: Dawn Cottrell

Print Name

Title: School Business Administrator



Signature