

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 6/30/2027.

Employer: Salem County Vocational

County: Salem

Date: 1/27/2025

Name: Frank H. Maurer, III
Print Name

Title: Assistant Superintendent

Signature