

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 1/1/2024 thru 12/31/2026.

Employer: Morris County

County: Morris

Date: May 29, 2024

Name: Marie Celona
Print Name

Title: Labor Relations Specialist
Marie Celona
Signature