Certification

I declare to the best of my k	nowledge and beli	ef that the attache	ed docu	ment(s) are tru	e electronic	copies of the
executed collective negotiat	ions agreement(s)	and the included	summa	ry is an accura	te assessmen	t of the collective
bargaining agreement for the	e term beginning	10/1/2018	thru	9/30/2022		

Full-Time Toll Local 194A

Employer: Burlington County Bridge Commission

County: Burlington

Date: 6/25/2021

Name: Christine J. Nociti

Print Name

Title: Treasurer/CFO

Signature