Certification

I declare to the best of my knowledge and beli-	ef that the attach	ed document(s) are true e	electronic copies	s of the
executed collective negotiations agreement(s)	and the included	summary is a	n accurate	assessment of th	e collective
bargaining agreement for the term beginning	7/1/2022	thru 6/30	/2027	(4)	

Employer:	Mountain Lakes BOE		
County:	Morris	Y	
Date:	9/30/2024		
Name:	Alex Ferreira		
	Pri	nt Name	
Title:	School Business Administrator		
	Si	apature	