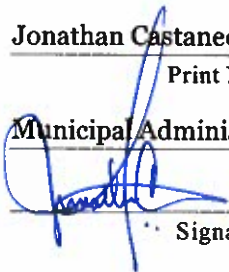


## Certification

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 1/1/2021 thru 12/31/2025.

Employer: Town of West New York  
County: Hudson   
Date: 6/25/2021  
Name: Jonathan Castaneda  
Print Name  
Title: Municipal Administrator  
  
Signature