Certification

I declare to the best of my knowledge and bel	ief that the attach	ed document(s)	are true electronic cop	ies of the
executed collective negotiations agreement(s)	and the included	summary is an	accurate assessment of	f the collective
bargaining agreement for the term beginning	1/1/2021	thru 12/31/	2024	

Employer:	Township of Stafford			
County:	Ocean			
Date:	6/13/2022			
Name:	Douglas R. Ga	annon	_	
	I	Print Name		
Title:	Chief Financi	al Officer		
		> M		
		Signature		