

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 1/1/2020 thru 12/31/2023.

Employer: Teamsters #331 (Division of Social Services)

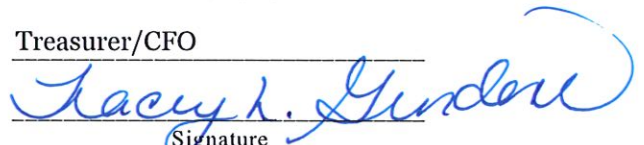
County: Gloucester

Date: 5/5/2020

Name: Tracey N. Giordano

Print Name

Title: Treasurer/CFO


Signature