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 1/11/18 thru 12/31/20.

Employer:	Hopewell Two Fire District	No.
County:	Mercer	
Date:	4/20/18	
Name:	Sqram Ocicki Print Name	
Title:	Purchasing Agent	
	Sarain	
	Signature	