Certification

I declare to the best of my knowledge and beli	ief that the attach	ned document(s) are tre	ue electronic copies of the
executed collective negotiations agreement(s)	and the included	d summary is an accura	ite assessment of the collective
bargaining agreement for the term beginning		thru 12/31/2021	

Employer:	Borough of Seaside Park	
County:	Ocean	
Date:	8/28/2020	
Name:	Michael Capabianco	
	Print Name	
Title:	Borough Administrator	
	Signature	

PBA