

STATE OF NEW JERSEY
DEPARTMENT OF COMMUNITY AFFAIRS
DIVISION OF LOCAL GOVERNMENT SERVICES

Pursuant to N.J.S.A. 40A:4-87 I hereby certify that the following resolution has been duly adopted by the governing body of: Township of West Orange

Name of Municipality

Clerk's Signature

I hereby certify the Township of West Orange has realized or is in receipt of written notification of the state or federal monies cited in the following resolution, which meets all statutory requirements and will be included in the 2016 municipal budget.

Name of Municipality

Year

Signature, Chief Financial Officer

Resolution Number:

Date of Adoption:

6/28/2016

Revenue Title:

NJPN Grant

Amount:

\$

3000.00

Appropriation Title:

NJPN Grant

Amount:

\$

3000.00

Local Match - Source:

none

Amount:

\$

none

Approval is hereby given to the cited resolution adopted by the governing body pursuant to N.J.S.A. 40A: 4-87

For Director, Division of Local Government Services

by:

Duly Appointed Designee

Date Certified

THIS CERTIFICATION FORM MAY BE REPRODUCED
TO BE USED FOR STATE AND FEDERAL GRANTS ONLY

FOR DCA USE ONLY

Municode: _____

Doc. No. : _____