PO Box 520
Trenton, New Jersey 08625-0520

Library Name: ________________________________
County: ______________________________________
Street Address: ________________________________
City: ________________________________________

Library service based on 2010 Census Population of _________________

2014 ACCURACY CERTIFICATION FY16

Due date: Postmarked no later than March 15, 2015

WE CERTIFY THAT:

1. The information contained in the annual statistical report is accurate and represents the true condition of this library.
2. The edit checks have been reviewed and explanations appended as necessary.
3. The library is in conformance with all applicable laws and regulations.*

(Signature) President, Board of Trustees or County Library Commission
Date

(Signature) Library Director
Date

(Printed Name)

(Please check all that apply and attach documentation as appropriate)

| Copy of Director’s NJ Public Librarian’s Certificate attached (must submit annually) |
| If population served is 20,000 or more, a list of librarians holding a NJ Certificate is attached |

Library contact person for questions regarding Annual Statistical Report and Certification form:

(Name)  (Email)  (Phone number with area code)

Mail certification to: NJ State Library, PO Box 520, Trenton, NJ 08625-0520, ATTN: Laretha Head
or Fax certification to: 609-278-2652 ATTN: Laretha Head


If the library is NOT in conformance with # 3 above, cross the line out, sign the application and return with a brief explanation of the failure.