SIGNATURE PAGE

CC-3-2027

To the Monmouth County Board of County Commissioners:

**THE UNDERSIGNED HEREBY DECLARES THAT
I (WE) HAVE CAREFULLY EXAMINED THE SPECIFICATIONS.
I (WE) HEREBY CERTIFY PRICES QUOTED ARE IN ACCORDANCE
WITH YOUR REQUIREMENTS.**

Company Name: New Hope Integrated Behavioral Health Care
(PRINT)

Preparer's Name: David Roden, LCSW, LCADC
(PRINT)

Signature: David Roden August 11, 2026
(DATE)

Address: 80 Conover Road

Marlboro, NJ 07746

Telephone No.: 732-946-3030

Fax No.: 732-946-4891

E-Mail Address: droden@newhopeibhc.org
(This should be the email where Contracts would be sent)

Contact Person: David Roden, LCSW, LCADC

FEIN: [redacted]
(Federal Employee ID)

BRC: [redacted]
(Business Registration Certificate)

(Revised 2/2017)