

**SUMMARY FORM**

**COLLECTIVE BARGAINING AGREEMENT  
PUBLIC SECTOR / NON-POLICE & NON-FIRE**

**Section I: Agreement Details**

Public Employer: Aberdeen Township County: Monmouth    
 Employee Organization: Aberdeen Township Clerical Employees Employees in Unit: 19   
 Base Year Contract Term: 1/1/2010 12/31/2011 New Contract Term 1/1/2012 12/31/2014   
 Type of Settlement:  Mediated Settlement  Fact-Finder Recommendation  Voluntary Settlement  Super Conciliation

Section II: Economic	Column A	Column B
	Base Year - Total Costs <i>(Last Year of Previous agreement)</i>	New Base Year - Total Costs <i>(First Year of Successor agreement)</i>
Item 1 ..... <u>Salary</u>	\$621,489	\$620,395
Item 2 ..... <u>Increment</u>	\$2,995	\$3,940
Item 3 ..... <u>Longevity</u>	\$14,266	\$23,033
Item 4 ..... <u>Education</u>	\$3,600	\$11,900
Item 5 ..... <u>Stipends</u>	\$6,000	\$6,000
Item 6 ..... <u>Overtime</u>	\$31,000	\$31,445
Item 7 ..... <u>Holiday pay</u>	\$9,322	\$12,777
Item 8 ..... <u>Uniform</u>	\$1,800	\$3,000
Item 9 ..... _____		
Item 10 ..... _____		
Item 11 ..... _____		
Item 12 ..... _____		
Any additional items list on separate sheet Additional Items		
<b>Section III: Totals</b> - Sum of costs in each column	\$690,472	\$712,490
	(Total)	(Total)

**Section IV: Analysis of new successor agreement**

**NEW AGREEMENT ANALYSIS**

Total Base Year(previous agreement)	\$690,472			
<b>Effective Date (m/d/yyyy)</b>	<u>1/1/2012</u>	<u>1/1/2013</u>	<u>1/1/2014</u>	
Percent Increase .....	3.00%	3.00%	0.00%	
Total cost of increase ..	\$20,714	\$21,335	\$0	
Total base salary (successor agreement) .....	\$711,186	\$732,521	\$732,521	

**Section V: Impact of Settlement** - average annual increase over term of agreement

Percentage Impact (average per year over term of agreement) 2.00   
 Dollar Impact (average per year over term of agreement) \$14,016.00


**Section VI**

*Health Insurance (Indicate costs associated on each line)*

	Base Year	Year 1			
Cost of Health Plan .....	\$276,492	\$226,103			
Employee Contributions .....	\$11,270	\$20,757			
Prescription .....					
Dental .....					
Vision .....					

*The undersigned certifies that the foregoing figures are true and is aware that if any of the foregoing items are false, s/he is subject to punishment.*

**Section VII**

Prepared by: Carol Kozma Title: Principal Clerk   
   
 Signature Date: 4/18/2016