SUMMARY FORM

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

Section I: Agreement Deta		ORTTV OF THE CIT	Y OF CAMDEN			Camden	
Public Employer:	County,						
Employee Organization	AFSCME Council	71, Local 3441		yees in Unit 47			
Base Year Contract Term:	1/1/2007	12/31/2011	New Contrac	tTerm <u>1/1/201</u>	2 12/31	12/31/2015	
Type of Settlement:	✓ Mediated Settle	ment 🗌 Fa	et-Finder Recommendation		Voluntary Settlement	/oluntary Settlement Super Conciliation	
			Colun <u>Base Year - 1</u> (Last Year of Prev	Total Costs	Column New Base Year - (First Year of Succes	Total Costs	
Section II: Economic		l					
Item 1 Sal	ary		\$1,124,150		\$1,124,150		
Item 2 Increment					_		
Item 3 Lor	ngevity	<u> </u>	\$6,000		\$6,000		
Item 4							
Item 5		_			,		
Item 6		_					
Item 7		_					
Item 8							
Item 9		_					
Item 10		_					
Item 11		_					
Item 12		<u> </u>					
Any additional items list on separate st	heet	Additional Items			l		
Section III: Totals - Sum of cor	nin in cook ectumn		\$1 120 150		\$1,130,150		
Section III. Totals - sum or co	sts in each column		\$1,130,150				
			(To	etal)	(Total)		
Section IV: Analysis of new success	ssor agreement		NEW AGREEN	MENT ANALYSIS			
Total Base Year(previous agreement)	\$1,130,150						
Effective Date (m/d/yyyy)		1/1/2012	1/1/2013	1/1/2014	1/1/2015		
Percent Increase		0	3	2	2		
Total cost of increase		\$0	\$33,725	\$23,158	\$23,621		
Total base salary (successor agreeme	nt)	\$1,124,150	\$1,157,875	\$1,181,033	\$1,204,654		
Section V: Impact of Settler	nent - average annual it	ocrease over term of agn	eement				
Percentage Impact (average per year	over term of agreement)	1.75					
Dollar Impact (average per year over t	erm of agreement)	\$20,126.00					
Section VI				-			
Health Insurance (Indicate costs asso	clated on each line)						
		Base Year	Year 1				
Cost of Health Plan							
Employee Contributions		590	10,3%				
Prescription		~ F\$				 	
Dental		_5%_	25%				
Vision			Enflor.	10 mil 10 din	alless a continue		
The undersigned certifies i	that the foregoing figur	する がんりん es are true and is awar	ST OF KUNK e that if any of the fo	regoing items are fals	relicy + 1 reform se, she is subject to puni	≤¶C€N sment.	
Section VII		Λ					
Prepared by:	Lisa Hend	ricks Richardso	n	Title	: Staff Attorney		
	1 /	Print Name		1100	/ /	r	
	K		ardı_	Date	:: 4/10/1	4	
	/ /	Signature				<u> </u>	

Certification

Information

1.00000						
	nd the included sur	mmary is an accurate assessment of the collective				
bargaining agreement for the term beginning1	./1/2012 t <u>l</u>	ıru 12/31/2015 .				
	Employer:	Housing Authority of the City of Camden				
	County:	Camden				
	County.	•				
		4/10/2014				
	Date:	4/10/2014				
	Name:	Lisa Hendricks Richardson				
		Print Name				
		1 Int Ivanio				
	mtal	Staff Attorney /				
	Title:	Stuff Action 1				
		Makulard				
		Signature				