

SUMMARY FORM

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

Section I: Agreement Details

Public Employer: Garwood Bd. of Education County: Union
 Employee Organization: Garwood Education Assoc. Employees in Unit: _____
 Base Year Contract Term: 7/1/08 - 6/30/11 New Contract Term: 7/1/11 - 6/30/14
 Type of Settlement: Mediated Settlement Fact-Finder Recommendation Voluntary Settlement Super Conciliation

	Column A Base Year - Total Costs <small>(Last Year of Previous agreement)</small>	Column B New Base Year - Total Costs <small>(First Year of Successor agreement)</small>
Section II: Economic		
Item 1 Salary		
Item 2 Increment		
Item 3 Longevity		
Item 4 <u>Tuition Reim.</u>	<u>10,000</u>	<u>10,000</u>
Item 5 <u>Extra CURR.</u>	<u>19,549</u>	<u>19,549</u>
Item 6		
Item 7		
Item 8		
Item 9		
Item 10		
Item 11		
Item 12		
Any additional items list on separate sheet Additional Items		
Section III: Totals - Sum of costs in each column	(Total)	(Total)

Section IV: Analysis of new successor agreement

NEW AGREEMENT ANALYSIS

Total Base Year (previous agreement) _____
 Effective Date (m/d/yyyy) 7/1/11 7/1/12 7/1/13
 Percent Increase 0.0% 2.75% 3%
 Total cost of increase _____
 Total base salary (successor agreement)

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

Percentage Impact (average per year over term of agreement) 1.9%
 Dollar Impact (average per year over term of agreement) _____

Section VI


Health insurance (indicate costs associated on each line)

	Base Year	Year 1		
Cost of Health Plan	<u>556,404.88</u>	<u>549,826.03</u>		
Employee Contributions	<u>0</u>	<u>32,900.06</u>		
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:

Janine Murray
Print Name

Signature

Title:

SBA

Date:

4/25/2013