

**SUMMARY FORM**

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

**Section I: Agreement Details**

Public Employer: Township of Freehold County: Monmouth  
 Employee Organization: CWA Local 1038 Employees in Unit: 33  
 Base Year Contract Term: 1/1/2008 12/31/2011 New Contract Term 1/1/2012 12/31/2016  
 Type of Settlement:  Mediated Settlement  Fact-Finder Recommendation  Voluntary Settlement  Super Conciliation

	Column A <b>Base Year - Total Costs</b> <i>(Last Year of Previous agreement)</i>	Column B <b>New Base Year - Total Costs</b> <i>(First Year of Successor agreement)</i>
<b>Section II: Economic</b>		
Item 1 ..... Salary	\$1,395,397	\$1,443,935
Item 2 ..... Increment		
Item 3 ..... Longevity	\$36,400	\$51,050
Item 4 ..... Tuition Reimbursement		
Item 5 ..... Extra Curricular		
Item 6 ..... Licenses	\$25,050	\$29,975
Item 7 .....		
Item 8 .....		
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	<b>\$1,456,847</b>	<b>\$1,524,960</b>
	(Total)	(Total)

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

**NEW AGREEMENT ANALYSIS**

Total Base Year (previous agreement) \$1,456,847

Effective Date (m/d/yyyy)	1/1/2012	1/1/2013	1/1/2014	1/1/2015	1/1/2016
Percent Increase .....	1.5	1.5	1.5	1.75	2.0
Total cost of increase .....	\$68,113	\$21,659	\$21,984	\$26,033	\$30,272
Total base salary (successor agreement) .....	\$1,524,960	\$1,546,619	\$1,568,603	\$1,594,636	\$1,624,908

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

Percentage Impact (average per year over term of agreement) 1.65  
 Dollar Impact (average per year over term of agreement) \$43,813.00

Contributions based on plan costs and pursuant to Chapter 78, P.L. 2011

**Section VI**

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

	Base Year	Year 1
Cost of Health Plan .....	\$4,926,945	\$5,404,888
Employee Contributions .....	\$24,256	\$19,408
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: Catherine M. Campbell, CPA, CFO Title: Director of Finance/CFO  
 Signature:  Date: 5/3/2012

## Certification

I declare to the best of my knowledge and belief that the attached document(s) are true electronic copies of the executed collective negotiations agreement(s) and the included summary is an accurate assessment of the collective bargaining agreement for the term beginning 1/1/2012 thru 12/31/2016.

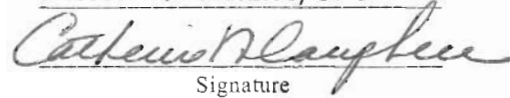
Employer: Township of Freehold

County: Monmouth

Date: 5/3/2012

Name: Catherine M. Campbell, CPA, CFO  
Print Name

Title: Director of Finance/CFO

  
Signature