

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 7/1/2010 thru 6/30/2014.

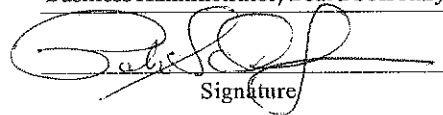
Employer: Matawan-Aberdeen Regional School District

County: Monmouth

Date: 5/31/2013

Name: Patrick S. DeGeorge
Print Name

Title: Business Administrator/Board Secretary


Signature

SUMMARY FORM

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

Section I: Agreement Details

Public Employer: Matawan-Aberdeen Regional School District County: Monmouth
 Employee Organization: Matawan Regional Teachers Association Employees in Unit: 493
 Base Year Contract Term: 7/1/2007 6/30/2010 New Contract Term 7/1/2010 6/30/2014
 Type of Settlement: Mediated Settlement Fact-Finder Recommendation Voluntary Settlement Super Conciliation

	Column A Base Year - Total Costs <i>(Last Year of Previous agreement)</i>	Column B New Base Year - Total Costs <i>(First Year of Successor agreement)</i>
Section II: Economic		
Item 1 <u>Salary</u>	\$28,731,696	\$28,731,696
Item 2 <u>Increment</u>	\$701,866	\$701,866
Item 3 <u>Longevity</u>	\$95,424	\$95,424
Item 4 _____		
Item 5 _____		
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	\$29,528,986 (Total)	\$29,528,986 (Total)

Section IV: Analysis of new successor agreement

NEW AGREEMENT ANALYSIS

Total Base Year (previous agreement) \$29,528,986

Effective Date (m/d/yyyy)	<u>7/1/2011</u>	<u>7/1/2012</u>	<u>7/1/2013</u>	<u>7/1/2014</u>
Percent Increase	0.0%	2.5%	2.5%	2.5%
Total cost of increase ..	\$0	\$718,292	\$736,250	\$754,656
Total base salary (successor agreement)	\$28,731,696	\$29,449,988	\$30,186,238	\$30,940,894

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

Percentage Impact (average per year over term of agreement) 1.88
 Dollar Impact (average per year over term of agreement) \$551,549.50

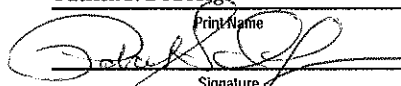
Section VI

Health Insurance (indicate costs associated on each line)

	Base Year	Year 1			
Cost of Health Plan	\$3,958,249	\$4,409,788			
Employee Contributions	\$0	\$293,371			
Prescription	\$1,210,784	\$1,124,085			
Dental	\$526,818	\$502,010			
Vision	\$331,684	\$33,262			

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: Patrick S. DeGeorge Title: Business Administrator/Board Secretary

 Signature

Date: 5/31/2013