SUMMARY FORM

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

Section I: Agreemer	nt Detal		* .						
Employee Organization S		Spring Lake Board o	f Education	County: Monmouth	County: Monmouth				
		Spring Lake Education Association				Employees in Unit: 32			
		7/1/2012	7/1/2012 6/30/2015 Ne			2015	6/30/2018 Voluntary Settlement Super Conciliation		
Type of Settlement:			ement Fact-Finder Recommen		ndation	⊘ \			
				- Base Year	umn A - Total Costs revious agreement)		Column B New Base Year - Total Costs (First Year of Successor agreement)		
Section II: Economi	ic					T		1	
item 1 Salary		iry	_	\$2,083,111		_	\$2,145,900		
Item 2	Item 2 , Incre		ment		\$0		\$0		
Item 3	Long	gevity		\$0-	. <u> </u>	_	\$0		
Item 4	Tultic	n Reimbursement		\$11,000		_	\$11,000		
item 5	Sch /	A: Educational Stipends	_	\$10,150			\$10,150		
Item 6	Sch E	3: Extracurricular Stipen	_	\$46,139			\$46,140		
Item 7									
Item 8			-						
llem 9 ,			•	,					
Item 10			-						
Item 11			-						
Item 12						-			
Any additional items list on s	separate she	eel	Additional Herns			_			
Section III; Totals - Sum of costs in each column				\$2,150,400		+	1 10 10 10		
						=	\$2,213,190		
				(Total)		(Total)		
Section IV: Analysis of n	IOW SUCCESS	sor agreement		<u>NEW AGRE</u>	EMENT ANALYSIS				
Total Base Year(previous ag	greement)	\$2,150,400	_						
Effective Date (m/d/y)	yyy)		7/1/2016	7/1/2017	7/1/2018				
Percent Increase		3.01%	2.64%	2.63%	_				
Total cost of increase			\$62,789	\$56,726	\$57,990	_			
Total base salary (successor	r agraemen	0	\$2,145,900	\$2,202,626	\$2,260,616	_			
Section V: Impact of	Settlem	ent - average annual inc	ease over term of ag	reement					
Percentage Impact (average	e per year o	ver term of agreement)	2.76						
Dollar impact (average per year over term of agreement)		\$59,168.33							
Section VI									
Health Insurance (Indicate c	osts associ	aled on each line)							
Cost of Health Plan , .			Base Year	Year 1					
			\$426,765	\$481,094		_			
Employee Contributions			\$84,605	\$130,310		-			
Prescription		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	\$112,799	\$119,665		-			
Dental			\$27,251	\$27,251		_			
- INIMAL - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -		.,	\$0	\$0		-			
The undersigned ce Section VII	ertifies ti	nat the foregoing figures	are true and is awa	re that if any of the	foregoing items are	false,	s/he is subject to punisment.		
Prepared by:		Nick Mack	'es			Title:	School Business Administra	ator	
i tepaseu by.		Or /	Print Name		-				
		/were	Y/ Welly		-	Date:	5/3/2016		
			Signature						