

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 7/1/2019 thru 6/30/2020

Employer: Central Regional BJE
County: OCEAN
Date: 10/16/2019
Name: Kevin O'Sheen
Print Name
Title: BA/BS
[Signature]
Signature

New Jersey Public Employment Relations Commission
NON-POLICE AND FIRE
COLLECTIVE NEGOTIATIONS AGREEMENT SUMMARY FORM

Line #

SECTION I: Parties and Term of Contracts

1 Public Employer: Central Regional BOE County: Ocean

2 Employee Organization: CR Administrative Office Personnel Assoc Number of Employees in Unit: 7

3 Base Year Contract Term: 2018-19 New Contract Term: 2019-20

SECTION II: Type of Contract Settlement (please check only one)

4 Contract settled without neutral assistance

5 Contract settled with assistance of mediator

6 Contract settled with assistance of fact-finder

7 Contract settled with assistance of super-conciliator

8 If contract was settled in fact-finding, did the fact-finder issue a report with recommendations?
 Yes No

SECTION III: Salary Base

The salary base is the cost of salaries in the final year of the expired or expiring agreement. This is the base cost from which the parties negotiate the salary increases.

9 Salary Costs in Base Year \$ 358,541

10 Longevity Costs in Base Year \$ 6,700

11 Total Salary Base \$ 365,241

SECTION IV: Salary Increases for Each Year of New Agreement*

	Year 1	Year 2	Year 3	Year 4	Year 5
12 Effective Date (month/day/year)	<u>07/01/2019</u>				
13 Cost of Salary Increments (\$)	<u>10,756</u>				
14 Salary Increase Above Increments (\$)	<u>2,912</u>				
15 Longevity Increase (\$)	<u>700</u>				
16 Total \$ Increase (sum of lines 13-15)	<u>14,368</u>				
17 New Salary Base (\$)	<u>379,609</u>				
18 Percentage increase over prior year	<u>3.70</u> %				

**If contract duration is longer than five years, please add an additional page.*

SECTION V: Increases in Other Contractual Economic Items or Newly Added Economic Items*

19	Item Description	Base Year Cost (\$)	Year 1 Increase (\$)	Year 2 Increase (\$)	Year 3 Increase (\$)	Year 4 Increase (\$)	Year 5 Increase (\$)
20	Totals(\$):						

*If contract duration is longer than five years, please add an additional page.

SECTION VI: Medical Costs

		Base Year	Year 1
21	Health Plan Cost	\$ 116,018	\$ 116,018
22	Prescription Plan Cost	\$ 39,282	\$ 39,282
23	Dental Plan Cost	\$ 6,437	\$ 6,437
24	Vision Plan Cost	\$ 614	\$ 614
25	Total Cost of Insurance	\$ 162,351	\$ 162,351
26	Employee Insurance Contributions	\$ 26,401	\$ 26,401
27	Employee Contributions as % of Total Insurance Cost	16.26 %	16.26 %

Section VI: Medical Costs (continued)

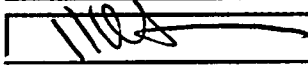
28 Identify any insurance changes that were included in this CNA.
NONE

SECTION VII: Certification and Signature

29 The undersigned certifies that the foregoing figures are true:

Print Name: Kevin O'Shea

Position/Title: BA/BS

Signature: 

Date: 10/16/2019

Send this completed and signed form along with an electronic copy of the contract and the signed certification form to: contracts@perc.state.nj.us

NJ Public Employment Relations Commission
Conciliation and Arbitration
PO Box 429
Trenton, NJ 08625
Phone: 609-292-9898

Revised 8/2016