

**SUMMARY FORM**

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

**Section I: Agreement Details**

Public Employer: Township of Randolph County: Morris  
 Employee Organization: Randolph Township Municipal Supervisory Employees Association Employees in Unit: 15  
 Base Year Contract Term: 1/1/2010 12/31/2010 New Contract Term 1/1/2011 12/31/2014  
 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>
<b>Section II: Economic</b>		
Item 1 ..... <u>Salary</u>	\$1,180,636	\$1,180,636
Item 2 ..... <u>Increment</u>		
Item 3 ..... <u>Longevity</u>		
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		
<b>Section III: Totals</b> - Sum of costs in each column	\$1,180,636 (Total)	\$1,180,636 (Total)

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

**NEW AGREEMENT ANALYSIS**

Total Base Year (previous agreement) \$1,180,636

Effective Date (m/d/yyyy)	1/1/2011	1/1/2012	1/1/2013	1/1/2014
Percent Increase .....	\$0.00	\$1,500	\$1,500	\$1,500
Total cost of increase ..	\$0	\$22,500	\$22,500	\$22,500
Total base salary (successor agreement) .....	\$1,180,636	\$1,203,136	\$1,225,636	\$1,248,136

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

Percentage Impact (average per year over term of agreement) 1.41  
 Dollar Impact (average per year over term of agreement) \$16,875.00

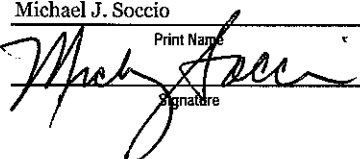
**Section VI**

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

	Base Year	Year 1			
Cost of Health Plan .....	\$234,252	\$262,368			
Employee Contributions .....	\$21,774	\$22,370			
Prescription .....					
Dental .....	\$15,340	\$16,956			
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: Michael J. Soccio Title: CFO  
  
 Signature: \_\_\_\_\_ Date: 8/31/2012