SUMMARY FORM

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

Section I: Agreement Deta		olah				Morris		
Public Employer:						County: Morris		
Employee Organization	Randolph Townsh	ip Employee Associ	ation		Employees in Unit: 40			
Base Year Contract Term:	1/1/2010	12/31/2010	New Contract Term		12/31/2014			
Type of Settlement:	Mediated Settle	ment 🔲 Fa	ct-Finder Recommer	ndation 🔲	Voluntary Settlement	☐ Super Co	onciliation	
- Maria - Mari		Column A <u>Base Year - Total Costs</u> (Last Year of Previous agreement)		Column B New Base Year - Total Costs (First Year of Successor agreement)				
ection II: Economic								
Item 1 Sal	агу	_	\$1,231,960		\$1,231,960			
Item 2 Inci	rement	_				———		
Item 3 Lor	gevity	_				i		
Item 4								
Item 5		-						
Item 6		_						
Item 7		_						
Item 8		_						
Item 9		_						
Item 10								
Item 11		<u> </u>						
Item 12								
Any additional items list on separate si	neet	Additional Items						
Carlan III. Tatala			\$1 231 060		\$1,231,960			
Section III: Totals - Sum of costs in each column			\$1,231,960					
			(Total)	(Total)			
Section IV: Analysis of new succes	ssor agreement		NEW AGRE	EMENT ANALYSIS				
Total Base Year(previous agreement)	\$1,231,960							
		_						
Effective Date (m/d/yyyy)		1/1/2011	1/1/2012	1/1/2013	1/1/2014			
Percent Increase		0	1041	1041	1041			
Total cost of increase		\$0	\$28,080	\$28,080	\$28,080		,	
Total base salary (successor agreeme	nt)	\$1,231,960	\$1,260,040	\$1,288,120	\$1,316,200			
ection V: Impact of Settler	nent - average annual i	ncrease over term of agr	reement					
Percentage Impact (average per year	over term of agreement)	1.67						
Dollar Impact (average per year over t	erm of agreement)	\$21,060.00						
Section VI								
Health Insurance (Indicate costs asso	ciated on each line)	*****						
Cost of Health Dian		Base Year	Year 1					
Cost of Health Plan		\$340,804	\$381,974					
Employee Contributions		\$17,319	\$17,319					
Prescription								
Dental		\$20,664	\$21,636					
Vision								
The undersigned certifies	that the foregoing figur	res are true and is awa	re that if any of the	foregoing items are false	e, s/he is subject to punis	sment.		
Section VII			,					
Prepared by:	Michael J	. Soccio	/	Title:	CFO			
	11/	Print Name	fun.					
		cus/	Wer-	Date:	10/31/2012			
	-//	Signature		_	,,			