# 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 1/1/2015 thru 12/31/2018.

Employer: Morris County Prosecutor's Office

County: Morris

Date: 10/24/2018

Name: Mary Susan D'Amore

Print Name

Mary Susan DAME

Title: Labor Relations Specialist

## New Jersey Public Employment Relations Commission POLICE AND FIRE

# **COLLECTIVE NEGOTIATIONS AGREEMENT SUMMARY FORM**

Line #		
	SECTION I: Parties and Term of Contracts	
1	Public Employer: Morris County Prosecutor's Office	County: Morris
2	Employee Organization: Superior Officers Association	Number of Employees in Unit: 20
3	Base Year Contract Term: 2014	
4	New Contract Term: 1/1/15-12/31/18	
<b>R</b>	SECTION II: Type of Contract Settlement (please	e check only one)
5	Contract settled without neutral assistance	
6	Contract settled with assistance of mediator	
7	Contract settled with assistance of fact-finder	
8	Contract settled in Interest Arbitration	
9	If contract was settled in Interest Arbitration, did the Arbit	rator issue an Award? Yes No
	SECTION III: Base Salary Calculation	
	The "base year" refers to the final year of the expiring or ear	xpired agreement.
	or table and any amount provided pursuant to a salary income It shall also include any other item agreed to by the parties	se salary' means the salary provided pursuant to a salary guide rement, including any amount for longevity or length of service. s, or any other item that was included in the base salary as y shall not include non-salary economic issues, pension and
10	Salary Costs in base year	\$2,368,856
11	Longevity Costs in base year	\$
12	Other base year salary costs	
	\$	
	S	
	<u> </u>	
	Sum of "Other" Costs Listed in Line 12.	\$ <u> </u>
13	Total Base Salary Cost: (sum of lines 10, 11, 12):	\$2,368,856

<b>SECTION IV:</b>	Increase in Base Salar	y Cost (	for each v	year of New CN	A)
--------------------	------------------------	----------	------------	----------------	----

Total Base Salary Cost from Line 13: 14

	Increases	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6
15	Effective Date (month/day/year)	1/1/15	1/1/16	1/1/17	1/1/18	:	:
16	Cost of Salary Increments (\$)	\$69,001	\$31,999	\$30,000	\$64,477	:	
17	Salary Increase Above Increments (\$)			:			
18	Longevity Increase (\$)		:				
19	Total Increased Cost for "Other" Items (\$)						
20	Total Increase (\$) (sum of lines 16-19)	\$69,001	\$31,999	\$30,000	\$64,477		

### **SECTION V: Average Increase Over Term of New CNA**

21	Dollar Increase Over Life of Contract	\$ 195,477	[Take sum of all amounts listed on Line 20 above]
22	Percentage Increase Over Life of Contrac	8.25 %	[Divide amount on Line 21 by amount on Line 14]
23	Average Percentage Increase Per Year	2.06	[Divide percentage on Line 22 by number of years of
			the contract]

Emplo	oyer: Morris County Prosecutor's Office Employee Organization: Superior Officers Association Page
SECT	ON VII: Medical Costs (continued)
31	Employee Insurance Contributions \$ \$
32	Contributions as % of Total Insurance Cost
33	Identify any insurance changes that were included in this CNA.
34	SECTION VIII: Certification and Signature  The undersigned certifies that the foregoing figures are true:
34	The undersigned certifies that the foregoing figures are true.
	Print Name: Mary Susan D'Amore
	Position/Title: Labor Relations Specialist
	Signature: Main Juan Dawre
	October 24, 2018
	Date: JOCIODEI 24, 2018
	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

### SECTION VI: Other Economic Items Outside Base Salary and Increases

#### ←Increases→

24	Item Description	Base Year Cost (\$)	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6
	:							
						. vovb		
							:	
25	Totals (\$):	:						

# **SECTION VII: Medical Costs**

	Insurance Costs	Base Year	Year 1
26	Health Plan Cost	\$	\$
27	Prescription Plan Cost	\$	\$
28	Dental Plan Cost	\$	\$
29	Vision Plan Cost	\$	\$
30	Total Cost of Insurance	\$	\$

Page 3 of 4 (complete all pages)