

**SUMMARY FORM**

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

**Section I: Agreement Details**

Public Employer: County of Atlantic County: Atlantic  
 Employee Organization: Government Workers Union - Surrogates Office Employees in Unit: 4  
 Base Year Contract Term: 1/1/2011 12/31/2013 New Contract Term 1/1/2014 12/31/2016  
 Type of Settlement:  Mediated Settlement  Fact-Finder Recommendation  Voluntary Settlement  Super Conciliation

	Column A	Column B
	Base Year - Total Costs <i>(Last Year of Previous agreement)</i>	New Base Year - Total Costs <i>(First Year of Successor agreement)</i>
<b>Section II: Economic</b>		
Item 1 ..... <u>Salary</u>	\$114,469	\$117,135
Item 2 ..... <u>Increment</u>		
Item 3 ..... <u>Longevity</u>	\$1,800	\$1,800
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	\$116,269	\$118,935
	(Total)	(Total)

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

**NEW AGREEMENT ANALYSIS**

Total Base Year (previous agreement)	\$116,269		
<b>Effective Date (m/d/yyyy)</b>	<u>1/1/2014</u>	<u>1/1/2015</u>	<u>1/1/2016</u>
Percent Increase .....	2.29	2.24	2.19
Total cost of increase ..	\$2,665	\$2,665	\$2,665
Total base salary (successor agreement) .....	\$118,934	\$121,599	\$124,264

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

Percentage Impact (average per year over term of agreement) 2.24  
 Dollar Impact (average per year over term of agreement) \$2,665.00

**Section VI**

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

	Base Year	Year 1
Cost of Health Plan .....	\$46,191	\$50,427
Employee Contributions .....	\$2,136	\$2,798
Prescription .....	\$13,183	\$13,782
Dental .....	\$2,333	\$2,440
Vision .....	\$198	\$198

*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: Jeffrey L. Monroe Title: Fiscal Officer-Budget  
 Print Name  
 Signature Date: 6/4/2014