## SUMMARY FORM

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

Employee Organization	Section I: Agreement De	etails Mantua Township B	oard of Education			Clayees	tor		
Section II: Totals - Sent of uses a season system.   Section III: Totals - Sent of uses a season system.   Section III: Totals - Sent of uses a season system.   Section III: Totals - Section III:	Public Employer:	0000 100 100 000 000 000					County: Gloucester		
Type of Settionnert:   Mediated Settionert   Fact-Finder Recommendation   Voluntary Settionnert   Super Condition    Rem 1	Employee Organization	Mantua Township E		Employees in Unit:					
Column A   Base Year - Total Coats   Case Trans of Presents agreement   Section II: Economic	Base Year Contract Term:	7/1/2012	6/30/2015	New Contract Term	New Contract Term 7/1/2015 6/30/2017				
Section II: Economic   Substitute   Substi	Type of Settlement	☐ Mediated Settleme	ent 🔲 Fa	ct-Finder Recommendation	☑ Voluntary Settle	Voluntary Settlement Super Conciliation			
Clast Year of Previous agreements   Sp. 042, 853   Sp. 043, 850   Sp. 044, 855   Sp. 044, 8				Column A		Column B	7		
Section II: Economic   Salary   Silary   Silar									
### ### ### ### ### ### ### ### ### ##	Section II: Economic					*	=		
### ### ### ### ### ### ### ### ### ##	Item 1	Salary		\$9.042.653					
Rem 3	200	ncrement		-					
Rem 5 . Tullion Reimbursament S39,000 S43,000 S43,000 Rem 6		ongevity		\$68,600					
Rem 5 Tuliforn Reimbursament \$39,000 \$43,000 \$43,000 \$843,000 \$866 \$66 \$866 \$7 \$866 \$866 \$866 \$866 \$8	Item 4 St	ipends		\$19,726	\$19,727				
Rem 6   Rem 7   Rem 8   Rem 9   Rem 10   Rem 17   Rem 18   Rem 19   Rem 10   Rem 11   Rem 12   Rem 10   Rem 11   Rem 12   Rem 15   Rem 16   Rem 17   Rem 18   Rem 19   Rem 1	Item 5 Tu	uition Reimbursement		All the second s			_		
Rem 7   Rem 8   Rem 9   Rem 10   Rem 11   Rem 12   Rem 12   Rem 12   Rem 15   Rem 16   Rem 17   Rem 17   Rem 17   Rem 18   Rem 19   Rem							_		
Rem 10   .	Item 7						_		
### 17   ### 18   ###	_								
Rem 17	Item 9				7				
Rem 17   Analysis of new successor agreement   Section IV: Impact of Settlement - average annual increase over term of agreement   Section IV: Secti	Item 10								
Rem 12									
Section III: Totals - Sum of costs in each column  Section III: Totals - Sum of costs in each column  Section IV: Analysis of new successor agreement  Total Baser Vear/previous agreement  Section IV: Analysis of new successor agreement  Percentage inspect (newage per year over term of agreement  Percentage inspect (newage per year over term of agreement  Section IV: Impact of Settlement - average annual increase over term of agreement  Percentage inspect (newage per year over term of agreement  Section IV: Impact of Settlement - average annual increase over term of agreement  Section IV: Impact of Settlement - average annual increase over term of agreement  Section IV: Impact of Settlement - average annual increase over term of agreement  Section IV: Impact of Settlement - average annual increase over term of agreement  Section IV: Impact of Settlement - average annual increase over term of agreement  Section IV: Impact of Settlement - average annual increase over term of agreement  Section IV: Impact of Settlement - average annual increase over term of agreement  Section IV: Impact of Settlement - average annual increase over term of agreement  Section IV: Impact of Settlement - average annual increase over term of agreement  Section IV: Impact of Settlement - average annual increase over term of agreement  Section IV: Impact of settlement - average annual increase over term of agreement  Section IV: Impact of Settlement - average annual increase over term of agreement  Section IV: Impact of Settlement - average annual increase over term of agreement  Section IV: Impact of Sett									
Section IV: Analysis of new successor agreement  Total Basis Vear/previous agreement  \$9,320,105   Effective Date (mid/vvvv)  7/1/2015  7/1/2016  Percent horsesse  3 2,75  Total cost of increase  \$279,603  \$263,992  Total basis salary (successor agreement)  Section V: Impact of Settlement - average annual increase over term of agreement  Percentage impact (sevrage per year over term of agreement)  2,88  Dollar impact (sevrage per year over term of agreement)  Section V:  ###################################	100	e sheet	Additional Items						
Section IV: Analysis of new successor agreement  Total Basis Vear/previous agreement  \$9,320,105   Effective Date (mid/vvvv)  7/1/2015  7/1/2016  Percent horsesse  3 2,75  Total cost of increase  \$279,603  \$263,992  Total basis salary (successor agreement)  Section V: Impact of Settlement - average annual increase over term of agreement  Percentage impact (sevrage per year over term of agreement)  2,88  Dollar impact (sevrage per year over term of agreement)  Section V:  ###################################									
Effective Date (mid/yyyy)	Section IV: Analysis of new suc	cessor agreement		LE PER	SIS	(Total)			
Percent Increase   3   2.75	Total Base Year[previous agreemen	\$9,320,105							
Percent Increase   3   2.75	Effective Date (m/d/vvvv)		=/1/001=	=1.100.6					
Total cost of increase   \$279,603	88 1 100		Table 1	And the second s	-	_	_		
Total base salary (successor agreement)  Section V: Impact of Settlement - average annual increase over term of agreement  Percentage impact (everage per year over term of agreement)  2.88  Dollar Impact (everage per year over term of agreement)  Section VI  Section VI  Section VI  Section VI  Cost of Health Insurance (Indicate costs associated on each line)  Base Year Year 1  Sc.,026,245 \$2,986,092  Employee Contributions \$139,038 \$478,949  Prescripton \$536,395 \$646,508  Dental \$81,413 \$75,579  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 punisment.  Section VII  Prepared by: Michelle H. Daminger Title: Board Secretary  Print Name	Total cost of increase .					_	_		
Section V: Impact of Settlement - average annual increase over term of agreement  Percentage impact (average per year over term of agreement)  2.88  Dollar Impact (average per year over term of agreement)  Section VI  The undersigned certifies that the foregoing figures are true and is aware that if any of the foregoing items are false, sihe is subject to punisment.  Section VII  Prepared by:  Michelle H. Daminger  Print Name  Title: Board Secretary	Total base salary (successor agreer	ment)	Name and Proposition of Advanced Co.	A Committee of the Comm	_		-		
Percentage impact (average per year over term of agreement)  Dollar impact (average per year over term of agreement)  Section VI  Pleath Insurance findicate costs associated on each line)  Cost of Health Plan \$2,026,245 \$2,986,092  Employee Contributions \$139,038 \$478,949  Prescription \$536,395 \$646,508  Dental \$81,413 \$75,579  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 punisment.  Section VII  Prepared by: Michelle H. Daminger Title: Board Secretary  Print Name	Section V: Impact of Settle	ement - average annual incr							
Dollar Impact (average per year over term of agreement) \$271,797.00  Section VI  Pleable Insurance (Indicate costs associated on each line)  Base Year Year 1  Cost of Health Plan \$2,026,245 \$2,986,092  Employee Contributions \$139,038 \$478,949  Prescription \$536,395 \$646,508  Dental \$81,413 \$75,579  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 punisment.  Section VII  Prepared by: Michelle H. Daminger Title: Board Secretary  Print Name				bornerit					
Section VI  Health Insurance (Indicate costs associated on each line)  Base Year Year 1  Cost of Health Plan \$2,026,245 \$2,986,092  Employee Contributions \$139,038 \$478,949  Prescription \$536,395 \$646,508  Dental \$81,413 \$75,579  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 punisment.  Section VII  Prepared by: Michelle H. Daminger Title: Board Secretary  Print Name									
Health Insurance (Indicate costs associated on each line)   Base Year   Year 7			\$271,797.00						
Base Year   Year   1	Section VI		H11						
Section   Fleath   Plan   Secretary   Se	Health Insurance (Indicate costs as:	sociated on each line)							
Employee Contributions	Cost of Health Plan								
Prescription \$536,395 \$646,508  Dental \$81,413 \$75,579  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 punisment.  Section VII  Prepared by: Michelle H. Daminger Title: Board Secretary  Print Name	Employee Contributions				_		_		
Vision  S81,413 \$75,579  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 punisment.  Section VII  Prepared by:  Michelle H. Daminger  Print Name  Title: Board Secretary	Prescription								
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Prepared by:  Michelle H. Daminger  Print Name  Michelle H. Daminger  Title: Board Secretary	Vision		\$61,413	9/3,5/9					
Section VII  Prepared by:  Michelle H. Daminger  Print Name  Title: Board Secretary  Print Name					-	_	_		
Prepared by: Michelle H. Daminger Title: Board Secretary Print Name	The undersigned certifies	s that the foregoing figures	are true and is awar	e that if any of the foregoing items	are false, s/he is subjec	t to punisment.			
Print Name		Specifical Section 2015							
	Prepared by:	Michelle H.			Title: Board Se	cretary			
		Michelle H. Da	aminger Trans	en (Lange ep: (Planta Thambertalis 1815), 15 parting per (1816), (2016)	Date: 9/28/20	15			