

## 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 7/1/21 thru 6/30/24.

Employer: Voorhees Twp Bd of Edu.

County: Camden

Date: 1/18/23

Name: Helen G. Haley  
Print Name

Title: Business Administrator

Helen G. Haley  
Signature

**New Jersey Public Employment Relations Commission**  
**NON-POLICE AND FIRE**  
**COLLECTIVE NEGOTIATIONS AGREEMENT SUMMARY FORM**

Line #

**SECTION I: Parties and Term of Contracts**

1	Public Employer: <input style="width: 95%;" type="text" value="Voorhees Twp BOE"/>	County: <input style="width: 90%;" type="text" value="Camden"/>
2	Employee Organization: <input style="width: 95%;" type="text" value="VTAA"/>	Number of Employees in Unit: <input style="width: 15%;" type="text" value="12"/>
3	Base Year Contract Term: <input style="width: 95%;" type="text" value="2020-2021"/>	New Contract Term: <input style="width: 90%;" type="text" value="7/1/21 - 6/30/24"/>

**SECTION II: Type of Contract Settlement (please check only one)**

4	<input checked="" type="checkbox"/>	Contract settled without neutral assistance
5	<input type="checkbox"/>	Contract settled with assistance of mediator
6	<input type="checkbox"/>	Contract settled with assistance of fact-finder
7	<input type="checkbox"/>	Contract settled with assistance of super-conciliator
8	If contract was settled in fact-finding, did the fact-finder issue a report with recommendations?	
	Yes <input type="checkbox"/>	No <input type="checkbox"/>

**SECTION III: Salary Base**

The salary base is the cost of salaries in the final year of the expired or expiring agreement. This is the base cost from which the parties negotiate the salary increases.

9	Salary Costs in Base Year	\$ <input style="width: 95%;" type="text" value="1,476,008"/>
10	Longevity Costs in Base Year	\$ <input style="width: 95%;" type="text" value="27,500"/>
11	Total Salary Base	\$ <input style="width: 95%;" type="text" value="1,503,508"/>

**SECTION IV: Salary Increases for Each Year of New Agreement\***

	Year 1	Year 2	Year 3	Year 4	Year 5
12 Effective Date (month/day/year)	<input style="width: 95%;" type="text" value="7/1/2021"/>	<input style="width: 95%;" type="text" value="7/1/2022"/>	<input style="width: 95%;" type="text" value="7/1/2023"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>
13 Cost of Salary Increments (\$)	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>
14 Salary Increase Above Increments (\$)	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>
15 Longevity Increase (\$)	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>
16 Total \$ Increase (sum of lines 13-15)	<input style="width: 95%;" type="text" value="45,843"/>	<input style="width: 95%;" type="text" value="33,487"/>	<input style="width: 95%;" type="text" value="46,248"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>
17 New Salary Base (\$)	<input style="width: 95%;" type="text" value="1,549,351"/>	<input style="width: 95%;" type="text" value="1,582,838"/>	<input style="width: 95%;" type="text" value="1,629,086"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>
18 Percentage increase over prior year	<input style="width: 95%;" type="text" value="3.0"/> %	<input style="width: 95%;" type="text" value="3.0"/> %	<input style="width: 95%;" type="text" value="3.0"/> %	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>

*\*If contract duration is longer than five years, please add an additional page.*

**SECTION V: Increases in Other Contractual Economic Items or Newly Added Economic Items\***

19	Item Description	Base Year Cost (\$)	Year 1 Increase (\$)	Year 2 Increase (\$)	Year 3 Increase (\$)	Year 4 Increase (\$)	Year 5 Increase (\$)
	10 Month AP Summer Days	21,763	2,871	386	1,113		
20	<b>Totals(\$):</b>	<b>21,763</b>	<b>24,634</b>	<b>25,020</b>	<b>26,133</b>		

*\*If contract duration is longer than five years, please add an additional page.*

**SECTION VI: Medical Costs**

		Base Year	Year 1
21	Health Plan Cost	\$ 236,568	\$ 243,118
22	Prescription Plan Cost	\$	\$
23	Dental Plan Cost	\$ 16,792	\$ 15,393
24	Vision Plan Cost	\$ 1,574	\$ 1,443
25	Total Cost of Insurance	\$ 254,934	\$ 259,954
26	Employee Insurance Contributions	\$ 57,882	\$ 59,492
27	Employee Contributions as % of Total Insurance Cost	22.7 %	22.9 %

**Section VI: Medical Costs (continued)**

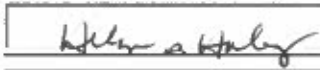
**28** Identify any insurance changes that were included in this CNA.

**SECTION VII: Certification and Signature**

**29** The undersigned certifies that the foregoing figures are true:

Print Name: Helen G Haley

Position/Title: School Business Administrator

Signature: 

Date: 1/20/2023

---

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](mailto: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