

**Certification**

Bridgewater-Raritan Supervisors' Association

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 7/1/2016 thru 6/30/2019.

Employer: Bridgewater-Raritan Regional School District  
County: Somerset  
Date: 11/30/2017  
Name: Peter F. Starrs  
Print Name  
Title: Business Administrator/Board Secretary  
  
Signature

**SUMMARY FORM**

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

**Section I: Agreement Details**

Public Employer: Bridgewater-Raritan Regional School District County: Somerset  
 Employee Organization: Bridgewater-Raritan Supervisors' Association Employees in Unit: 19  
 Base Year Contract Term: 7/1/2013 6/30/2016 New Contract Term 7/1/2016 6/30/2019  
 Type of Settlement:  Mediated Settlement  Fact-Finder Recommendation  Voluntary Settlement  Super Conciliation

	Column A Base Year - Total Costs <i>(Last Year of Previous agreement)</i>	Column B New Base Year - Total Costs <i>(First Year of Successor agreement)</i>
<b>Section II: Economic</b>		
Item 1 ..... <u>Salary</u>	\$2,009,641	\$2,056,868
Item 2 ..... <u>Increment</u>		
Item 3 ..... <u>Longevity</u>	\$12,753	\$12,753
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	\$2,022,394	\$2,069,621
	(Total)	(Total)

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

**NEW AGREEMENT ANALYSIS**

Total Base Year (previous agreement)	\$2,022,394			
<b>Effective Date (m/d/yyyy)</b>	<u>7/1/2016</u>	<u>7/1/2017</u>	<u>7/1/2018</u>	
Percent Increase .....	2.35%	2.35%	2.35%	
Total cost of increase ..	\$47,226	\$48,336	\$49,573	
Total base salary (successor agreement) .....	\$2,069,621	\$2,122,263	\$2,171,836	

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

Percentage Impact (average per year over term of agreement) 2.35  
 Dollar Impact (average per year over term of agreement) \$48,378.00

**Section VI**

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

	Base Year	Year 1			
Cost of Health Plan .. (all incl.) .....	\$334,552	\$374,698			
Employee Contributions .....	\$89,865	\$100,648			
Prescription .....					
Dental .....					
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 punishment.*

**Section VII**

Prepared by: Peter Starrs Title: Business Administrator  
  
 Print Name: \_\_\_\_\_ Date: 11/30/2017  
 Signature: \_\_\_\_\_