SUMMARY FORM

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

Section I: Agreement Deta Public Employer:		n of the Eastern Ca	amden County Reg	gional School Distric	et Camden		
	County.						
Employee Organization				-1.1	Employees in Unit: 191		
Base Year Contract Term:	7/1/2010 6/30/2011 New ✓ Mediated Settlement ☐ Fact-Finder Reco			ract Term <u>7/1/201</u>	11 6/30/2014		
Type of Settlement:				ndation	Voluntary Settlement Sup	ment Super Conciliation	
			Colu	amn A	Column B		
				- Total Costs evious agreement)	New Base Year - Total Costs (First Year of Successor agreement)	1	
Section II: Economic						7	
Item 1 Sala	ary	_	\$12,705,429	·	\$13,845,364	_	
Item 2 Incr	rement	-	ļ 			-	
	gevity		\$0		\$0	-	
Item 4 Coad	ching stipends	_	\$352,544		\$369,332	-	
	rity stipends		\$233,945		\$233,945	-	
Item 6		_				-	
Item 7		_				-	
Item 8		_				-	
Item 9						-	
Item 10		_				-	
Item 11						-	
Any additional items list on separate sh		Additional Name				-	
Any accuronal names list on separate sh		Additional Items				-	
Section III: Totals - Sum of costs in each column			\$13,291,918		\$14,448,641	7	
		(Total)		(Total)	-		
			,,	otaly	(Total)		
Continue III.							
Section IV: Analysis of new success Total Base Year(previous agreement)			<u>NEW AGREE</u>	MENT ANALYSIS			
TO SELECTION OF THE PROPERTY O	\$13,291,918	<u></u>					
Effective Date (m/d/yyyy)		7/1/2011	7/1/2012	7/1/2013			
Percent Increase		2.9%	2.9%	2.9%		-	
Total cost of increase		\$374,675	\$385,547	\$396,501			
Total base salary (successor agreemen	10	\$13,666,593	\$14,052,140	\$14,448,641		•	
Section V: Impact of Settlem	ent - average annual in	crease over term of ag	reement				
Percentage impact (average per year o	ver term of agreement)	2.67					
Dollar Impact (average per year over te	rm of agreement)	\$385,574.00	•				
Section VI			•				
Section VI							
Health Insurance (Indicate costs associ	lated on each line)	Base Year	Year 1				
Cost of Health Plan		\$3,634,994	\$3,466,521				
Employee Contributions		\$217,840	\$221,169				
Prescription		\$881,278	\$851,505				
Dental		\$246,001	\$269,902	***************************************			
Vision		\$36,888	\$37,315				
The undersigned cartifies th	nat the foregoing figure	s are true and is asse	ore that if any of the f	oragoina itema em 6-1-	se, s/he is subject to punisment Na		
Section VII		11		4 0 14 1.	e, sine is subject to punisment. • No	te: The ac	
Prepared by:	Fred D. W		integral p	· -			
·	FICU D. VV	Print Name		Title:	Dusiness Aummistrator/B	oaru secreta	
	Ludi			Date:	7/3/2012		
		Signature		Date.	7707	_	