MUNICIPAL CONTRACT EXPIRATION NOTICE
MBA-I Rev. (10/2024)

STATE OF CONNECTICUT
Department of Labor
Board of Mediation and Arbitration
38 Wolcott Hill Road, Wethersfield, CT 06109

(860) 263-6880

For Labor Dept. Use Only
Case Number of Contract Being Renegotiated
Mediator Assigned

Pursuant to the Municipal Employees Relations Act, Municipal Contract Expiration Notice forms must be completed by every municipal employer, Board of Education and Housing Authority in the State of Connecticut to report the expiration dates of all collective bargaining agreements for each of their employee organizations.

INSTRUCTIONS

1. Type one for each current collective bargaining agreement.
2. Print and send one copy to the State Dept. of Labor at the above address.
3. Print and send one copy to the employee organization (union) involved.
4. Retain one copy for your records.

NEW CASE NUMBER:

1. Name of Municipality/Board of Education/Housing Authority | Office Telephone No.

Office Address *(No. and Street, City, State, Zip Code)* of Employer listed above.

Name of Official Representing Employer Listed in Line No. 1. **and E-Mail Address** | Office Telephone No.

Employer Representative's Office Address *(If different from Municipality Office Address listed above)*

2. Name of Employee Organization (Union) | Local Number | Office Telephone No.

Employee Organization Office Address *(No. and Street, City, State, Zip Code)*

Name of Official Representing Employee Organization *(Last, First)* **and E-Mail Address** | Office Telephone No.

Union Representative's Office Address *(If different from Employee Organization Office Address above).*

3. Date Contract Approved	4. Date Contract Expires	5. Number of employees covered by the agreement	6. Type of employees covered.

6 (a) Wages: 1st yr. % ; 2nd yr. % ; 3rd yr. % ; 4th yr. %

6 (b) Increment (Steps): 1st yr. % ; 2nd yr. % ; 3rd yr. % ; 4th yr. %

7. Does the contract contain a Reopening clause? Yes ☐ No ☐ Impact Negotiations ☐	8. Date of Reopener **or** Starting date of Impact Negotiations
9. Subject matter of Reopening clause Wages ☐ Pension ☐ Other ☐	10. Explain if you check "other":

10. *(Continued)*

Filed by *(Signature)* | *(Title)* | Date Signed

Print Name