

**2018
AGREEMENT
BETWEEN THE
COUNTY OF MILWAUKEE
AND THE
WISCONSIN FEDERATION OF NURSES AND HEALTH PROFESSIONALS,
LOCAL 5000, AFT, AFL-CIO**

**MILWAUKEE COUNTY
DEPARTMENT OF HUMAN RESOURCES
EMPLOYEE RELATIONS
COURTHOUSE, ROOM 210
901 NORTH. 9TH STREET
MILWAUKEE, WI 53233
414-278-4852**

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TABLE OF CONTENTS

<u>SECTION</u>	<u>PAGE</u>
 PART 1	
1.01	Recognition..... 1
1.02	Employee Defined.....2
1.03	Duration of Agreement.....2
 PART 2	
2.01	Wages.....2

1
2
3
4
5
6
7
8
9
10
11
12
13
14
15
16
17
18
19
20
21
22
23
24
25
26
27
28
29
30
31

2018
AGREEMENT
between the
COUNTY OF MILWAUKEE
and the
WISCONSIN FEDERATION OF NURSES & HEALTH PROFESSIONALS,
LOCAL 5000, AFT, AFL-CIO

This Agreement, made and entered into by and between the County of Milwaukee, a municipal body corporate, as municipal employer, hereinafter referred to as “County”, and the Wisconsin Federation of Nurses & Health Professionals, Local 5000, AFT, AFL-CIO, as representatives of employees who are employed by the County of Milwaukee, hereinafter referred to as “Association”.

W I T N E S S E T H

In consideration of the mutual covenants herein contained, the parties hereto do hereby mutually agree as follows:

PART 1

1.01 RECOGNITION

The County of Milwaukee agrees to recognize, and herewith does recognize, the Wisconsin Federation of Nurses & Health Professionals, Local 5000, AFT, AFL-CIO as the exclusive collective Bargaining agent of behalf of the employees of Milwaukee County in accordance with the certification of the Wisconsin Employment Relations Commission, as amended, in respect to wages, pursuant to Subchapter IV, Chapter 111.70, Wisconsin Statutes.

1 1.02 EMPLOYEE DEFINED

2 Wherever the term “employee” is used in this Agreement, it shall mean and include only those
3 employees of Milwaukee County within the certified bargaining unit represented by the
4 Association.

5
6 1.03 DURATION OF AGREEMENT

7 This Agreement is to take effect on January 1, 2018. Unless otherwise modified or extended by
8 mutual agreement of the parties, this Agreement shall expire on December 31, 2018.

9
10 **PART 2**

11
12 2.01 WAGES

13 Effective Pay Period 14, 2018 (June 17, 2018) the wages of bargaining unit employees shall be
14 increased by one percent (1.0%).

15
16 **SIGNATURE PAGE FOLLOWS**

IN WITNESS WHEREOF, the parties hereto have executed this Contract on the day, month and year first above written.

Wisconsin Federation of Nurses & Health
Professionals, Local 5000, AFT, AFL-CIO

By: _____ Date: _____

Department of Human Resources

By: _____ Date: _____

Director of Employee Relations

Approved for execution:

By: _____ Date: _____

Corporation Counsel

*Approved as to funds available per
Wisconsin Statutes Section 59.255(2)(e):*

By: _____ Date: _____

Comptroller

Approved:

By: _____ Date: _____

County Executive

Approved as compliant under sec. 59.42(2)(b)5, Stats.:

By: _____ Date: _____

Corporation Counsel