|  |  |
| --- | --- |
| Zinnia Team Name: | Date: |
| Team Members: |
| MAXIMUM SETTLEMENT(THREAT OR WALKAWAY POINT) |
|  Item  | Proposal | Cost |
| Wages   |   |   |
| HealthInsurance  |   |   |
| Retirement    |   |   |
| OtherBenefits  |   |   |
| VacationsandHolidays   |   |   |
| Paid Sick Leave |  |  |
| Other    |   |   |
| Other    |   |   |
| Other   |  |  |
|  Attach additional sheets as needed with proposed language changes. |
| Proposed Contract Duration: \_\_\_\_\_\_\_ years  | ESTIMATED ANNUAL COSTS(add or delete years as needed)Year 1:Year 2:Year 3:TOTAL LIFE OF CONTRACT COST: $ |

|  |  |
| --- | --- |
| Zinnia Team Name: | Date: |
| Team Members: |
| TARGET (DESIRED) SETTLEMENT |
|  Item  | Proposal | Cost |
| Wages   |   |   |
| HealthInsurance  |   |   |
| Retirement    |   |   |
| OtherBenefits  |   |   |
| VacationsandHolidays   |   |   |
| Paid Sick Leave |  |  |
| Other    |   |   |
| Other    |   |   |
| Other   |  |  |
|  Attach additional sheets as needed with proposed language changes. |
| Proposed Contract Duration: \_\_\_\_\_\_\_ years  | ESTIMATED ANNUAL COSTS(add or delete years as needed)Year 1:Year 2:Year 3:TOTAL LIFE OF CONTRACT COST: $ |