

**BEFORE THE BOARD OF COUNTY COMMISSIONERS
LEWIS COUNTY, WASHINGTON**

IN THE MATTER OF:

APPROVE A COLLECTIVE BARGAINING AGREEMENT (APPENDIX 103) FOR TEAMSTERS LOCAL #252, REPRESENTING LEWIS COUNTY SUPERVISORS, FOR JANUARY 1, 2026, THROUGH DECEMBER 31, 2028

RESOLUTION NO. 26-154

WHEREAS, the Lewis County Board of County Commissioners has reviewed a proposed collective bargaining agreement between Lewis County and Teamsters Local #252, representing Lewis County Supervisors bargaining unit; and

WHEREAS, the agreement establishes wages, hours and working conditions for the period of January 1, 2026, through December 31, 2028, and it appears to be in the best interest of Lewis County and its employees to authorize its execution; and

WHEREAS, the last bargaining session with the supervisors occurred on February 12, 2026, but as a result of good-faith bargaining, the Supervisors bargaining unit voted to accept the County's February 12, 2026, offer on April 30, 2026; and

WHEREAS, health and welfare benefits and targeted grade increases as outlined in the agreement shall be retroactive to January 1, 2026.

NOW THEREFORE BE IT RESOLVED that the Board of County Commissioners hereby approves the collective bargaining agreement Appendix 103, attached hereto as Exhibit A, with Teamsters Local #252, representing the Supervisors bargaining unit, effective January 1, 2026, through December 31, 2028.

DONE IN OPEN SESSION this 12th day of May, 2026.

APPROVED AS TO FORM:
Jonathan Meyer, Prosecuting Attorney

BOARD OF COUNTY COMMISSIONERS
LEWIS COUNTY, WASHINGTON

David Bailey
By: David Bailey,
Chief Civil Deputy Prosecuting Attorney

Lindsey R. Pollock, DVM
Lindsey R. Pollock, DVM, Chair

ATTEST:



Scott J. Brummer
Scott J. Brummer, Vice Chair

Rieva Lester, CMC
Rieva Lester, CMC,
Clerk of the Lewis County Board of
County Commissioners

Sean D. Swope
Sean D. Swope, Commissioner

APPENDIX 103

Agreement between Lewis County and Teamsters Union Local No. 252 Supervisors

CONTENTS

1. INTRODUCTION	1
1.1. PREAMBLE	1
1.2. PURPOSE	1
2.RECOGNITION.....	1
2.1. SCOPE OF BARGAINING UNIT	1
3.EMPLOYMENT POLICIES.....	1
3.1. CDL MEDICAL EXAMINATION.....	1
3.2. BOOT ALLOWANCE	1
4.COMPENSABLE HOURS.....	2
4.1. INCLEMENT WEATHER	2
5.EMPLOYEE BENEFITS	2
5.1. VACATION.....	2
5.2. HEALTH AND WELFARE INSURANCE.....	2
5.3. VEBA.....	4
5.4. RETIREES HEALTH & WELFARE.....	4
6.GRIEVANCE PROCEDURE	4
6.1. PROCESSING STEPS.....	4
7.EMPLOYEE COMPENSATION	5
7.1. RANGE ASSIGNMENTS	5
7.2. WAGE ADJUSTMENTS	5
8.LAYOFF.....	5
8.1. LAYOFF GROUPS.....	6
9.SEVERABILITY.....	6
9.1. SEVERABILITY	6
10.DURATION OF AGREEMENT.....	7
10.1. DURATION OF AGREEMENT	7

1. INTRODUCTION

1.1. Preamble

1.1.1. This agreement is entered into by and between LEWIS COUNTY, WASHINGTON, a political subdivision of the State of Washington represented by the Board of County Commissioners, hereinafter referred to as the "Employer", and TEAMSTERS UNION LOCAL NO. 252, hereinafter referred to as the "Union".

1.2. Purpose

1.2.1. It is the purpose of this agreement to achieve and maintain harmonious relations between the Employer and the Union, to provide for equitable and peaceful adjustments of differences which may arise, and to establish standards of wages, hours, and working conditions.

2. RECOGNITION

2.1. Scope of Bargaining Unit

2.1.1. The Employer recognizes the Union as the exclusive bargaining representative for those purposes appropriate to the units stated in RCW 41.56 of all full-time mid-level supervisory employees of Lewis County in the present departments of Community Development, Public Works, 911 Communications, Information Technology Services, and Public Health and Social Services, excluding upper level supervisors, non-supervisory employees, confidential employees, elected officials, officials appointed for a fixed term of office, and all other employees of the Employer.

3. EMPLOYMENT POLICIES

3.1. CDL Medical Examination

3.1.1 When a CDL is required as a job classification prerequisite, the employee shall obtain and maintain such license. The Employer shall reimburse the employee for the cost of the CDL endorsement renewal minus the cost of the driver's license renewal and any other endorsements not required by the Employer for the performance of the job. After an employee completes their probationary period, the Employer shall reimburse expenses associated with the employee's required CDL physician's exam (if not covered by applicable health insurance). The Employer shall reimburse the employee for the bi-annual physician's exam to the extent the same is not covered by applicable health insurance, and any out of pocket shall be paid at one hundred percent (100%) by the employer. The supervisor's signature on the reimbursement form signifies the supervisor has verified the fitness for duty certification and authorizes payment to the employee. Employees may use sick leave for the exam if it occurs during their shift.

3.2. Boot Allowance

3.2.1 A three-hundred-dollar (\$300) boot stipend will be provided annually to eligible bargaining unit employees (where it is a requirement of their position). Eligible bargaining unit employees are defined as those who have completed their probationary period and whose job duties require them to work in the field more than fifty percent (50%) of the time, as determined by the employee's time sheet. The stipend is to be used to purchase boots which must be worn on the job. Foot protection shall meet the OSHA or ANSI standards for crush/penetration protection and comply with WAC 296-155-212 and WAC 296-80016060 and other Employer policies. The Employer may provide the stipend to a probationary employee prior to the completion of their probationary

period, under the condition that if the employee does not complete their probationary period, they must reimburse the employer for the stipend which may be taken as a payroll deduction from their final paycheck.

3.2.2 An employee whose job duties require them to work in the field, but less than fifty percent (50%) of the time, as determined by the employee's time sheet, shall be allotted the same three hundred-dollar (\$300) boot stipend on an as needed basis, as determined by their supervisor, no less than once every three (3) years.

3.2.3 Receipts will not be required; however, the Employer may issue policy guidance on what types of foot protection are acceptable and not allow the employee to work if their foot protection is deemed unsafe by the Employer for their job duties.

3.2.4 The Employer shall furnish rain gear. The rain gear shall be replaced only on an as- needed basis as determined by department directors or designee. Such gear shall be the property of the Employer.

4. COMPENSABLE HOURS

4.1. Inclement Weather

4.1.1. If the County closes the courthouse due to inclement weather after a Supervisor has already reported to their duty station and begun their in-person shift, the Supervisor shall receive hour-for-hour compensatory time for all hours worked from the start of their shift until the official time of closure, in addition to their applicable rate of pay.

4.1.2. All Supervisors required to work during inclement weather closures shall receive hour-for-hour compensatory time for all hours worked, in addition to their applicable rate of pay.

5. EMPLOYEE BENEFITS

5.1. Vacation

5.1.1. The Employer may elect to call in an employee while the employee is on vacation leave. If an employee is called back into service while on a day of vacation leave status, such employee shall:

- a) not be debited vacation for all hours worked during that day;
- b) be afforded priority in the rescheduling of any vacation which was deferred as a result of such non-debit; and
- c) be paid double the employee's usual rate of pay for all hours worked during such day, inclusive of any overtime premium payment.

5.1.2 If the employee is on a scheduled day off which is contiguous to the employee's scheduled vacation leave, and is called into service by the Employer on an emergency basis, the employee shall receive two and one-half (2 1/2) times the employee's normal rate of pay for all hours worked that day, inclusive of any overtime premium payment.

5.2. Health and Welfare Insurance

5.2.1. Effective January 1, 2026, based upon December 2025 hours the Employer shall remit, as outlined in 5.2.2 below, to the Washington Teamsters Welfare Trust, care of Northwest Administrators, on behalf of each employee who received compensation for eighty (80) or more hours in the previous calendar month, the sum required for the following plans:

Insurance Coverage	Premiums as of 01/01/2026
Medical – Plan B	\$1618.00
Life and A.D. & D “A”(\$30,000)	\$8.60
Time Loss “C”	\$6.00
9 Month Disability Waiver	\$11.40
Dental – Plan A	\$120.50
Vision – Extended	\$17.10
TOTAL PREMIUMS	\$1781.60

Beginning May 1, 2026, based on April 2026 hours, the Employer agrees to add Time Loss “A” to the employee’s benefits package, which shall be effective June 1.

Insurance Coverage	Premium Effective 06-01-2026
Medical – Plan B	\$1,618.00
Life AD&D Plan “A” (\$30,000)	\$8.60
Time Loss Plan A	\$18.00
9-Month Disability Waiver	\$11.40
Dental – Plan A	\$120.50
Vision – Extended	\$17.10
Total Premiums	\$1,793.60

5.2.2. Effective January 1, 2026, based on December 2025 hours the Employer shall pay one thousand five hundred dollars (**\$1,500**) per month to the Washington Teamsters Welfare Trust, care of Northwest Administrators, on behalf of each employee who received compensation for eighty (80) or more hours in the previous calendar month, for insurance premiums set forth above. The additional employer contributions for the 2026 payroll shall be included on any 2025 payroll that includes the new 2026 rates.

For the 2027 calendar year, the Employer agrees to increase their portion of premium contributions to one thousand five hundred and fifty dollars (**\$1,550**) per month. The additional employer contributions for the 2027 payroll shall be included on any 2026 payroll that includes the new 2027 rates.

For the 2028 calendar year, the Employer agrees to increase their portion of premium contributions to one thousand six hundred dollars (**\$1,600**) per month. The additional employer contributions for the 2028 payroll shall be included on any 2027 payroll that includes the new 2028 rates.

5.2.3. Maintenance of Benefits. The trustees of the Washington Teamsters Welfare Trust may modify benefits or eligibility of any plan for purpose of cost containment, cost management, or changes in medical technology and treatment. In the event premiums are increased, the Employer’s contribution shall at all times be equal to the amounts outlined in 5.2.2. Those premiums are allocated by agreement of the parties so that dental and vision insurance is fully paid through the Employer’s contribution.

5.2.4. Payments. The Employer will be responsible for paying to Northwest Administrators its monthly contributions and those withheld from employees’ wages on or before the tenth (10th) day of the month. Upon Union request, copies of all transmittals pertaining to benefits under this Section shall be posted on the Union bulletin board.

5.2.5. Delinquency. If the Employer is delinquent in payments, the Employer shall be liable for the payment of any claims incurred by employees or dependents during such delinquency.

5.2.6. Trust Agreement. The Washington Teamsters Welfare Trust Agreement shall be incorporated herein and deemed part of this Agreement as though fully set forth.

5.2.7. New Hires and Transferred Employees. Whenever an employee is transferred and/or promoted into a bargaining unit from another bargaining or from a non-represented position in which health care is not provided through the Washington Teamsters Welfare Trust, the Employer shall be required to make a double premium contribution for health care coverage to pay for the normal initial month.

- a) For the purposes of premium cost sharing, if any, the employee shall be responsible for their portion of the premium as set forth in this agreement if any exists, excluding the month in which double premium contribution is made. The Employer shall pay the entire premium of the second (2nd) contribution.
- b) Whenever a current Lewis County employee is transferred and/or promoted into a bargaining unit from another position in which health care is not provided through the Washington Teamsters Welfare Trust, the Employer shall be required (with its initial payment to the Washington Teamsters Welfare Trust only) to make a double premium contribution for health care coverage.

5.2.8. This agreement governs the employer’s obligation to contribute on behalf of bargaining unit employees to the Washington Teamsters Welfare Trust. When coverage under the Trust starts and ends is governed by the terms of the respective plan documents which is not part of this agreement.

5.3 VEBA

5.3.1. Employees may enroll in any VEBA Trust Program offered through the County provided that an employee or group of employees meet the specific requirements of the individual VEBA Trust plan selected.

5.4 Retirees Health & Welfare

5.4.1. Effective January 1, 2026, based on December 2025 hours, and each month thereafter during the period this Collective Bargaining Agreement is in effect, the Employer agrees to remit the full premium amount for each represented employee, who received compensation for eighty (80) hours or more in the previous month for coverage to the Washington Teamster Retirees Welfare Trust, c/o Northwest Administrators, Inc.

5.4.2. The full amount one hundred percent (100%) of the premium payment and increases shall be deducted from the eligible employee via payroll deduction.

Premium Effective Dates	Retirees Medical – RWT Plus
2026 Rate	\$94.85
2027 Rate	TBD
2028 Rate	TBD

6. GRIEVANCE PROCEDURE

6.1. Processing Steps

6.1.1. Step One: The Union, on behalf of the aggrieved employee, shall submit the grievance in writing to the appropriate department head within fourteen (14) calendar days of the action giving rise to the grievance. The written statement shall include the facts giving rise to the grievance, the section(s) of the Agreement allegedly violated, and the remedy sought. The department head shall respond in writing within fourteen (14) calendar days of its receipt.

6.1.2. Step Two: Should Step One fail to resolve the dispute, the Union shall, within fourteen (14) calendar days after receipt of the department head’s response, submit the grievance in writing to the Board of County Commissioners (BOCC) or designee. The BOCC or designee shall respond in writing within fourteen (14) calendar days following receipt of the Union’s grievance.

6.1.3. Step Three: Should Step Two fail to resolve the grievance, the Union shall, within fourteen (14) calendar days after the Union's receipt of the BOCC or designee decision, give written notice to the Employer of its intent to submit the grievance to arbitration.

7. EMPLOYEE COMPENSATION

7.1. Range Assignments

7.1.1. The below listed classifications and range placements shall be effective for the duration of this agreement.

Classifications	Range
Radio Services Supervisor	128
Planning Supervisor	126
ITS 5 Network Supervisor	130
Environmental Planner	126
Social Services Supervisor	123
Finance Supervisor – Public Works	123
Senior Engineer - PE	131
Associate Engineer - EIT	128
Central Shop Supervisor	124
GIS Supervisor	126
Transfer Station Supervisor	123
Road Maintenance Supervisor	124
Traffic Control Supervisor	124
Road Maintenance Assistant Supervisor	122

7.1.2 The Employer shall conduct a compensation study with comparable counties for the job classifications covered by this agreement in 2026, with the objective of considering bringing any classification below the fiftieth (50th) percentile up to the fiftieth (50th) percentile. Comparable counties include counties whose population and assessed value are +/- fifty percent (50%) of Lewis, and are, at this time, as follows: Chelan, Clallam, Cowlitz, Franklin, Grant, Grays Harbor, Island, and Mason counties.

7.2. Wage Adjustments

7.2.1. To preserve placement of Supervisors positions above the employees they supervise and fix the compression caused by Road Maintenance Tech 4's 2026 increase. The County agrees to a one (1) Grade increase for the Road Maintenance Layoff Group.

Group: Public Works Road Maintenance	
Road Maintenance Supervisor	124
Traffic Control Supervisor	124
Road Maintenance Assistant Supervisor	122

8. LAYOFF

8.1. Layoff Groups

8.1.1. In the event of a layoff, employees shall be laid off in accordance with the layoff procedure in the Master Labor Agreement, which may include bumping into Teamsters Combined groups. The layoff groups are as follows:

Group	Range	
Group: Public Health & Social Services Environmental Planning		
Environmental Planner	126	
Group: 911 Communications – Radio Services		
Radio Services Supervisor* *may bump into Combined	128	
Group: Community Development - Planning		
Planning Supervisor *may bump into Combined	126	
Group: Information Technology Services		
ITS 5 Network Supervisor* *may bump into Combined	130	
Group: Public Health & Social Services – Social Services		
Social Services Supervisor* *may bump into Combined	123	
Group: Public Works - Accounting		
Finance Supervisor – Public Works* * may bump into Combined	124	
Group: Public Works - Engineering		
Senior Engineer – PE	131	
Associate Engineer - EIT	128	
Group: Public Works – Fleet Services		
Central Shop Supervisor	124	
Group: Public Works - GIS		
GIS Supervisor	126	
Group: Public Works - Solid Waste		
Transfer Station Supervisor	123	
Group: Public Works - Road Maintenance		
Road Maintenance Supervisor (124)	Traffic Control Supervisor (124)	124
Road Maintenance Assistant Supervisor		122

8.1.2. An employee laid off shall be recalled in reverse order of their lay-off, i.e., last laid off, first to be recalled. The recall preference shall extend for twenty-four (24) months following the layoff.

8.1.3. Where employees have the same seniority date, ties shall be broken by the use of the employee's original hire date with the county. If a conflict still exists, then the matter shall be resolved by a coin flip.

8.1.4. Layoff notices shall be in writing and shall be provided to an affected employee at least thirty (30) calendar days in advance of the layoff date.

9. SEVERABILITY

9.1. Severability

9.1.1. Any portion of this Agreement which is held by a competent tribunal to be invalid or otherwise unenforceable, or any portion which is rendered so by operation of law, shall be ineffective to the extent of such invalidity or unenforceability without invalidating the remaining provisions of this Agreement. To the extent permitted by applicable law, the parties to this Agreement waive any provision of law which prohibits, renders void, or makes any provision of this Agreement unenforceable. If the invalidity of any portion of this Agreement shall deprive any party of the economic benefit intended to be conferred by this Agreement, the parties shall negotiate, in good faith, to develop a structure the economic effect of which is as close as possible to the economic effect of this Agreement without regard to such invalidity.

10. DURATION OF AGREEMENT

10.1. Duration of Agreement

10.1.1. This Agreement shall become effective January 1, 2026, and shall remain in full force and effect to and through the 31st day of December 2028. The Agreement may be opened by either party giving notice, in writing, not later than ninety (90) days prior to the expiration date.

Signed this 6th day of May, 2026.

TEAMSTERS UNION LOCAL NO. 252

BOARD OF COUNTY COMMISSIONERS
Lewis County, Washington



Brian Blaisdell, Teamsters Secretary-Treasurer



Lindsey R. Pollock, DVM, Chair



Heather Slusher, President/Business Agent



Scott Brummer, Vice-Chair

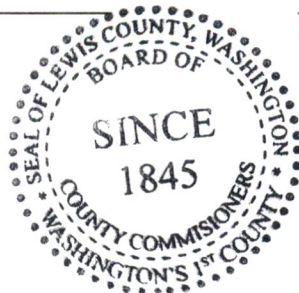
Attest:



Rieva Lester, Clerk of the Board



Sean D. Swope, Commissioner



WASHINGTON TEAMSTERS WELFARE TRUST SUBSCRIPTION AGREEMENT

COLLECTIVE BARGAINING AGREEMENT PROVIDING FOR PARTICIPATION IN TRUST

The Employer and Labor Organization below are parties to a Collective Bargaining Agreement providing for participation in the above Trust. An enforceable Collective Bargaining Agreement must exist as a condition precedent to participation in the Trust.

LEWIS COUNTY (SUPERVISORS GROUP)

TEAMSTERS UNION LOCAL NO. 252

Employer Name

Labor Organization (Union) Name

351 NW NORTH ST.

217 E. MAIN STREET

Address

Address

CHEHALIS WA 98532

CENTRALIA WA 98531

City State Zip Code

City State Zip Code

COLLECTIVE BARGAINING AGREEMENT

The parties' Collective Bargaining Agreement is in effect from: 1/1/2026 to: 12/31/2028

New Account Renewal — Account No. 126839 Approximate No. of Covered Employees: 19

INFORMATION CONCERNING EMPLOYER'S BUSINESS

Employer EIN (Tax ID No.) 91-6001351

Employer is: Public Entity Corporation - State of _____ Partnership Sole Proprietorship LLC

If Partnership or Sole Proprietorship, provide name/s of the owner or partners: _____

BENEFIT PLAN(S) DESIGNATED IN COLLECTIVE BARGAINING AGREEMENT

The Collective Bargaining Agreement provides that contributions will be made to the Trust on behalf of all employees for whom the Employer is required to contribute under the Trust Operating Guidelines for the purpose of providing such employees and their dependents with the following benefit plan(s): (The undersigned parties acknowledge the receipt of a copy of the Trust Operating Guidelines which by this reference are made a part hereof.)

<u>COVERAGE IN BARGAINING AGREEMENT</u> (For renewals, list all coverages, not just changes)		Monthly Rate
Medical Plan	<input type="checkbox"/> A <input checked="" type="checkbox"/> B <input type="checkbox"/> Z	\$ 1618.00
Life/AD&D	<input checked="" type="checkbox"/> A - \$30,000 Employee/\$3,000 Dependent	\$ 8.60
	<input type="checkbox"/> B - \$15,000 Employee/\$1,500 Dependent	
	<input type="checkbox"/> C - \$5,000 Employee/\$500 Dependent	
Weekly Time Loss	<input type="checkbox"/> E - \$500 <input checked="" type="checkbox"/> A - \$400 <input type="checkbox"/> B - \$300 <input type="checkbox"/> C - \$200 <input type="checkbox"/> D - \$100	\$ 18.00
Disability Waivers	<input checked="" type="checkbox"/> Additional 9 months Disability Waiver of Contributions - Medical only	\$ 11.40
Domestic Partners	<input type="checkbox"/> Domestic Partners – Medical	\$
Dental Plan	<input checked="" type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C	\$ 120.50
Domestic Partners	<input type="checkbox"/> Domestic Partners – Dental	\$
Vision Plan	<input checked="" type="checkbox"/> EXT	\$ 17.10
Domestic Partners	<input type="checkbox"/> Domestic Partners – Vision	\$

Will there be any coverage changes before the Collective Bargaining Agreement's expiration? Yes No.

If yes, attach a Subscription Agreement for each change.

EFFECTIVE DATE OF CONTRIBUTIONS - A Subscription Agreement must be submitted in advance of the effective date below.

Contributions above are effective (month, year) MAY, 2026 based on employment in the prior month.

Important: Coverage is effective in the month following the month in which the contributions are due based on the Trust's eligibility lag month. For example, contributions effective April based on March employment will provide coverage in May.

EXPIRATION OF COLLECTIVE BARGAINING AGREEMENT

Upon expiration of the above-referenced Collective Bargaining Agreement, the Employer agrees to continue to contribute to the Trust in the same amount and manner as required in the Collective Bargaining Agreement until such time as the Employer and the Labor Organization either enter into a successor Collective Bargaining Agreement, which conforms to the Trust Operating Guidelines, or one party notifies the other in writing (with a copy to the Trust) of its intent to cancel such obligation five (5) days after receiving notice, whichever occurs first. The Trust reserves the right to immediately terminate participation in the Trust upon the failure to execute this or any future Subscription Agreement or to comply with the Trust Operating Guidelines as amended by the Trustees from time to time.

For Employer Lindsay A. Bell, O.M.

For Union Bruce Bassell

Title/Assn Chair, BOCC Date 5/12/26

Title Secretary-Treasurer Date 5.6.26

ELIGIBILITY TO PARTICIPATE IN TRUST

Eligibility for benefits is determined in accordance with the requirements established in the Collective Bargaining Agreement provided such requirements are consistent with the Trust guidelines. To establish eligibility for benefits, Trust guidelines require that eligible employees must have the required number of hours in a month and have the contractually required contributions paid on their behalf. Eligibility will commence according to the Trust's lag month eligibility rule. Eligibility continues as long as the employee remains eligible, has the contractually required number of hours per month, and has the required contributions made. The Trust, however, will not recognize any contractual provision that conditions continued eligibility on having less than 40 or more than 80 hours in a month. Eligibility will end according to the Trust's policy for employees who do not have the required number of hours and contributions in a month and who do not qualify for an applicable extension of eligibility, if any.

Employees of a participating employer not performing work covered by the Collective Bargaining Agreement may participate in the Trust only pursuant to a written special agreement approved in writing by the Trustees. The Trustees reserve the right to recover any and all benefits provided to ineligible individuals from either the ineligible individual receiving the benefits or the employer responsible for misreporting them (if applicable).

REPORTING OBLIGATION AND CONSEQUENCES OF DELINQUENCY

Employer contributions are due no later than ten (10) days after the last day of each month for which contributions are due. The Employer acknowledges that in the event of any delinquency, the Trust Agreement provides for the payment of liquidated damages, interest, attorney fees, and costs incurred in collecting the delinquent amounts.

TRUSTEES' AUTHORITY TO DETERMINE TERMS OF PLANS

The parties recognize that the detail of the benefit plans provided by the Trust and the rules under which employees and their dependents shall be eligible for such benefits is determined solely by the Board of Trustees of the Trust in accordance with the terms of the governing Agreement and Declaration of Trust (Trust Agreement). The Trustees retain the sole discretion and authority to interpret the terms of the Trust's benefit plans, the plans' eligibility requirements, and other matters related to the administration and operation of the Trust and its benefits plans. The Trustees may modify benefits or eligibility of any plan for the purpose of cost containment, cost management, or changes in medical technology and treatment.

MECHANISM FOR HANDLING CONTRIBUTION INCREASES

The Trustees' authority shall include the right to adjust the contribution rates to support the benefit plans offered by the Trust and to maintain adequate reserves to cover any extended eligibility and the Trust's contingent liability.

The parties recognize that it is the intent of the Trust not to provide employee benefit plans for less than the full cost of any such plan. If the Collective Bargaining Agreement does not provide a mechanism for fully funding the designated benefit plans, the Board of Trustees may substitute a plan then available that is fully supported by the employer's contribution obligations. The disposition of any excess employer contributions will be subject to the collective bargaining process.

ACCEPTANCE OF TRUST AGREEMENT

The Employer and the Labor Organization accept and agree to be bound by the terms of the Trust Agreement governing the Trust, and any subsequent amendments to the Trust Agreement. The parties accept as their representatives for purposes of participating in the Trust the Trustees serving on the Board of Trustees and their duly appointed successors.

Provided, however, that in the event that either Section 2 or 3 of Article VIII of the Trust Agreement is amended to change or modify an Employer's liability as specified therein, such amendment will not be deemed applicable to an Employer until such time as the Employer enters into a successor Collective Bargaining Agreement after the expiration of the Employer's then current Collective Bargaining Agreement.

APPROVAL OF TRUSTEES

This Agreement has been approved by the Board of Trustees of the Washington Teamsters Welfare Trust.

Date _____

Administrative Agent
Washington Teamsters Welfare Trust

WASHINGTON TEAMSTERS WELFARE TRUST

SUBSCRIPTION AGREEMENT GUIDELINES

To participate in the Washington Teamsters Welfare Trust, the bargaining parties must complete a Subscription Agreement and file it with the Trust Administrative Office. Additionally, the bargaining parties are advised of the following general participation and benefit information. See Trust Operating Guidelines for more detailed information.

1. The Subscription Agreement language may not be modified or altered.
2. A Subscription Agreement must be submitted to the Trust Administrative Office for each new or renewed collective bargaining agreement, which provides for participation under the Trust.
3. For new accounts, an enforceable collective bargaining agreement, with contribution requirements and eligibility thresholds for benefits consistent with Trust guidelines, must be submitted prior to the activation of the account.
4. **Contributions for changes in plan benefits or new accounts are effective the first of the month following the date the Trust Office receives the documents in #2 and #3. Trust policy does not allow retroactive changes in contributions or benefits.**
5. A new Subscription Agreement is required for each change in benefits. If a collective bargaining agreement provides for benefit changes subsequent to those listed on the Subscription Agreement submitted to the Trust Office for the new or renewed agreement **and** the changes take effect prior to the termination of the collective bargaining agreement, the bargaining parties are responsible for formally notifying the Trust Administrative Office of the changes; this may be done by completing and submitting another Subscription Agreement, either with the initial agreement or anytime prior to the effective date of the contribution rate changes for the new benefits. Submission of a collective bargaining agreement by itself does not constitute formal notification of changes.

(Please Complete the Entire Subscription Agreement and Tear Off These Guidelines Before Mailing to the Trust Administrative Office)

WASHINGTON TEAMSTERS WELFARE TRUST SUBSCRIPTION AGREEMENT

COLLECTIVE BARGAINING AGREEMENT PROVIDING FOR PARTICIPATION IN TRUST

The Employer and Labor Organization below are parties to a Collective Bargaining Agreement providing for participation in the above Trust. An enforceable Collective Bargaining Agreement must exist as a condition precedent to participation in the Trust.

Lewis County (Supervisors)

Employer Name
360 NW North St.
Address
Chehalis **WA** **98532**
City State Zip Code

Teamsters Union Local No. 252
Labor Organization (Union) Name
217 E. Main St.
Address
Centralia **WA** **98531**
City State Zip Code

COLLECTIVE BARGAINING AGREEMENT

The parties' Collective Bargaining Agreement is in effect from: 1/1/26 to: 12/31/28

New Account Renewal — Account No. 120839 Approximate No. of Covered Employees: 18

INFORMATION CONCERNING EMPLOYER'S BUSINESS

Employer EIN (Tax ID No.) _____

Employer is: Public Entity Corporation - State of _____ Partnership Sole Proprietorship LLC

If Partnership or Sole Proprietorship, provide name/s of the owner or partners: _____

BENEFIT PLAN(S) DESIGNATED IN COLLECTIVE BARGAINING AGREEMENT

The Collective Bargaining Agreement provides that contributions will be made to the Trust on behalf of all employees for whom the Employer is required to contribute under the Trust Operating Guidelines for the purpose of providing such employees and their dependents with the following benefit plan(s): (The undersigned parties acknowledge the receipt of a copy of the Trust Operating Guidelines which by this reference are made a part hereof.)

COVERAGE IN BARGAINING AGREEMENT (For renewals, list all coverages, not just changes)		Monthly Rate
Medical Plan	<input type="checkbox"/> A <input checked="" type="checkbox"/> B <input type="checkbox"/> Z	\$1618.00
Life/AD&D	<input checked="" type="checkbox"/> A - \$30,000 Employee/\$3,000 Dependent <input type="checkbox"/> B - \$15,000 Employee/\$1,500 Dependent <input type="checkbox"/> C - \$5,000 Employee/\$500 Dependent	\$ 8.60
Weekly Time Loss	<input type="checkbox"/> E - \$500 <input type="checkbox"/> A - \$400 <input type="checkbox"/> B - \$300 <input checked="" type="checkbox"/> C - \$200 <input type="checkbox"/> D - \$100	\$6.00
Disability Waivers	<input checked="" type="checkbox"/> Additional 9 months Disability Waiver of Contributions - Medical only	\$11.40
Domestic Partners	<input type="checkbox"/> Domestic Partners - Medical	\$
Dental Plan	<input checked="" type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C	\$120.50
Domestic Partners	<input type="checkbox"/> Domestic Partners - Dental	\$
Vision Plan	<input checked="" type="checkbox"/> EXT	\$17.10
Domestic Partners	<input type="checkbox"/> Domestic Partners - Vision	\$

Will there be any coverage changes before the Collective Bargaining Agreement's expiration? Yes No.

If yes, attach a Subscription Agreement for each change.

EFFECTIVE DATE OF CONTRIBUTIONS - A Subscription Agreement must be submitted in advance of the effective date below.

Contributions above are effective (month, year) Jan., 2026 based on employment in the prior month.

Important: Coverage is effective in the month following the month in which the contributions are due based on the Trust's eligibility lag month. For example, contributions effective April based on March employment will provide coverage in May.

EXPIRATION OF COLLECTIVE BARGAINING AGREEMENT

Upon expiration of the above-referenced Collective Bargaining Agreement, the Employer agrees to continue to contribute to the Trust in the same amount and manner as required by the Collective Bargaining Agreement until such time as the Employer and the Labor Organization either enter into a successor Collective Bargaining Agreement, which conforms to the Trust Operating Guidelines, or one party notifies the other in writing (with a copy to the Trust) of its intent to cancel such obligation five (5) days after receiving notice, whichever occurs first. The Trust reserves the right to immediately terminate participation in the Trust upon the failure to execute this or any future Subscription Agreement or to comply with the Trust Operating Guidelines as amended by the Trustees from time to time.

For Employer Lindsay A. McIlroy, ORN
Title/Assn Chair - BOCC Date 5/12/26

For Union Brian Sawdell
Title Secretary-Treasurer Date 5.6.26

ELIGIBILITY TO PARTICIPATE IN TRUST

Eligibility for benefits is determined in accordance with the requirements established in the Collective Bargaining Agreement provided such requirements are consistent with the Trust guidelines. To establish eligibility for benefits, Trust guidelines require that eligible employees must have the required number of hours in a month and have the contractually required contributions paid on their behalf. Eligibility will commence according to the Trust's lag month eligibility rule. Eligibility continues as long as the employee remains eligible, has the contractually required number of hours per month, and has the required contributions made. The Trust, however, will not recognize any contractual provision that conditions continued eligibility on having less than 40 or more than 80 hours in a month. Eligibility will end according to the Trust's policy for employees who do not have the required number of hours and contributions in a month and who do not qualify for an applicable extension of eligibility, if any.

Employees of a participating employer not performing work covered by the Collective Bargaining Agreement may participate in the Trust only pursuant to a written special agreement approved in writing by the Trustees. The Trustees reserve the right to recover any and all benefits provided to ineligible individuals from either the ineligible individual receiving the benefits or the employer responsible for misreporting them (if applicable).

REPORTING OBLIGATION AND CONSEQUENCES OF DELINQUENCY

Employer contributions are due no later than ten (10) days after the last day of each month for which contributions are due. The Employer acknowledges that in the event of any delinquency, the Trust Agreement provides for the payment of liquidated damages, interest, attorney fees, and costs incurred in collecting the delinquent amounts.

TRUSTEES' AUTHORITY TO DETERMINE TERMS OF PLANS

The parties recognize that the detail of the benefit plans provided by the Trust and the rules under which employees and their dependents shall be eligible for such benefits is determined solely by the Board of Trustees of the Trust in accordance with the terms of the governing Agreement and Declaration of Trust (Trust Agreement). The Trustees retain the sole discretion and authority to interpret the terms of the Trust's benefit plans, the plans' eligibility requirements, and other matters related to the administration and operation of the Trust and its benefits plans. The Trustees may modify benefits or eligibility of any plan for the purpose of cost containment, cost management, or changes in medical technology and treatment.

MECHANISM FOR HANDLING CONTRIBUTION INCREASES

The Trustees' authority shall include the right to adjust the contribution rates to support the benefit plans offered by the Trust and to maintain adequate reserves to cover any extended eligibility and the Trust's contingent liability.

The parties recognize that it is the intent of the Trust not to provide employee benefit plans for less than the full cost of any such plan. If the Collective Bargaining Agreement does not provide a mechanism for fully funding the designated benefit plans, the Board of Trustees may substitute a plan then available that is fully supported by the employer's contribution obligations. The disposition of any excess employer contributions will be subject to the collective bargaining process.

ACCEPTANCE OF TRUST AGREEMENT

The Employer and the Labor Organization accept and agree to be bound by the terms of the Trust Agreement governing the Trust, and any subsequent amendments to the Trust Agreement. The parties accept as their representatives for purposes of participating in the Trust the Trustees serving on the Board of Trustees and their duly appointed successors.

Provided, however, that in the event that either Section 2 or 3 of Article VIII of the Trust Agreement is amended to change or modify an Employer's liability as specified therein, such amendment will not be deemed applicable to an Employer until such time as the Employer enters into a successor Collective Bargaining Agreement after the expiration of the Employer's then current Collective Bargaining Agreement.

APPROVAL OF TRUSTEES

This Agreement has been approved by the Board of Trustees of the Washington Teamsters Welfare Trust.

Date _____

Administrative Agent
Washington Teamsters Welfare Trust

WASHINGTON TEAMSTERS WELFARE TRUST

SUBSCRIPTION AGREEMENT GUIDELINES

To participate in the Washington Teamsters Welfare Trust, the bargaining parties must complete a Subscription Agreement and file it with the Trust Administrative Office. Additionally, the bargaining parties are advised of the following general participation and benefit information. See Trust Operating Guidelines for more detailed information.

1. The Subscription Agreement language may not be modified or altered.
2. A Subscription Agreement must be submitted to the Trust Administrative Office for each new or renewed collective bargaining agreement, which provides for participation under the Trust.
3. For new accounts, an enforceable collective bargaining agreement, with contribution requirements and eligibility thresholds for benefits consistent with Trust guidelines, must be submitted prior to the activation of the account.
4. **Contributions for changes in plan benefits or new accounts are effective the first of the month following the date the Trust Office receives the documents in #2 and #3. Trust policy does not allow retroactive changes in contributions or benefits.**
5. A new Subscription Agreement is required for each change in benefits. If a collective bargaining agreement provides for benefit changes subsequent to those listed on the Subscription Agreement submitted to the Trust Office for the new or renewed agreement **and** the changes take effect prior to the termination of the collective bargaining agreement, the bargaining parties are responsible for formally notifying the Trust Administrative Office of the changes; this may be done by completing and submitting another Subscription Agreement, either with the initial agreement or anytime prior to the effective date of the contribution rate changes for the new benefits. Submission of a collective bargaining agreement by itself does not constitute formal notification of changes.

(Please Complete the Entire Subscription Agreement and Tear Off These Guidelines Before Mailing to the Trust Administrative Office)

RETIREE'S WELFARE TRUST

SUBSCRIPTION AGREEMENT

COLLECTIVE BARGAINING AGREEMENT

THE UNDERSIGNED EMPLOYER AND LABOR ORGANIZATION CONFIRM, AS A CONDITION PRECEDENT TO PARTICIPATION IN THE RETIREE'S WELFARE TRUST, THAT THEY ARE PARTIES TO A COLLECTIVE BARGAINING AGREEMENT PROVIDING FOR CONTRIBUTIONS TO BE MADE TO THE TRUST ON BEHALF OF ALL BARGAINING UNIT EMPLOYEES FOR WHICH THE EMPLOYER IS REQUIRED TO CONTRIBUTE. UPON EXPIRATION OF THE CURRENT OR ANY SUBSEQUENT BARGAINING AGREEMENT REQUIRING CONTRIBUTIONS, THE EMPLOYER AGREES TO CONTINUE TO CONTRIBUTE TO THE TRUST IN THE SAME MANNER AND AMOUNT AS REQUIRED IN THE MOST RECENT EXPIRED BARGAINING AGREEMENT UNTIL SUCH TIME AS THE UNDERSIGNED EITHER NOTIFIES THE OTHER PARTY IN WRITING (WITH A COPY TO THE TRUST FUND) OF ITS INTENT TO CANCEL SUCH OBLIGATION FIVE DAYS AFTER RECEIPT OF NOTICE OR ENTER INTO A SUCCESSOR BARGAINING AGREEMENT WHICH CONFORMS TO THE TRUST POLICY ON ACCEPTANCE OF EMPLOYER CONTRIBUTIONS, WHICHEVER OCCURS FIRST. THE PARTIES AGREE TO PROVIDE THE TRUST OFFICE WITH A COPY OF THE CURRENT AND ALL FUTURE COLLECTIVE BARGAINING AGREEMENTS.

RETIREE PLAN (Check one): RWT-PLUS RWT-XL

EFFECTIVE DATES OF CURRENT BARGAINING AGREEMENT: 01/01/26 to 12/31/28

If a new Bargaining Agreement, first payment is due the Trust based on hours worked effective _____

ACCEPTANCE OF TRUST AGREEMENT

THE UNDERSIGNED ACKNOWLEDGE RECEIPT OF A COPY OF THE TRUST AGREEMENT AND TRUST POLICY ON ACCEPTANCE OF EMPLOYER CONTRIBUTIONS (SEE THE BACK OF THIS FORM FOR THE POLICY ON ACCEPTANCE OF EMPLOYER CONTRIBUTIONS), AND ACCEPT AS THEIR REPRESENTATIVES FOR PURPOSES OF PARTICIPATING IN THE TRUST, THE JOINT LABOR AND MANAGEMENT TRUSTEES SERVING ON THE BOARD OF TRUSTEES AND THEIR DULY APPOINTED SUCCESSORS. THE UNDERSIGNED EMPLOYER AND LABOR ORGANIZATION, BY EXECUTION OF THIS SUBSCRIPTION AGREEMENT, CONSENT TO BE BOUND BY THE TERMS OF THE TRUST AGREEMENT GOVERNING THE RETIREE'S WELFARE TRUST, INCLUDING ANY SUBSEQUENT AMENDMENTS THERETO. THE UNDERSIGNED FURTHER ACKNOWLEDGE THAT WITH EACH SUCCESSIVE COLLECTIVE BARGAINING AGREEMENT TO THE ONE IDENTIFIED ABOVE THAT PROVIDES FOR CONTRIBUTIONS TO CONTINUE TO BE MADE TO THE RETIREE'S WELFARE TRUST, THE PARTIES AGREE TO CONTINUE TO BE BOUND BY THE TERMS OF THE TRUST AGREEMENT AND ANY SUBSEQUENT AMENDMENTS THERETO. THIS SUBSCRIPTION AGREEMENT WILL AUTOMATICALLY CONTINUE UNTIL SUCH TIME AS CONTRIBUTIONS ARE NO LONGER REQUIRED TO BE MADE TO THE TRUST UNDER A COLLECTIVE BARGAINING AGREEMENT BETWEEN THE PARTIES; HOWEVER, THE TRUST RESERVES THE RIGHT TO DISALLOW OR TERMINATE PARTICIPATION IN THE TRUST UPON FAILURE TO EXECUTE THIS SUBSCRIPTION AGREEMENT OR TO COMPLY WITH THE TRUST AGREEMENT OR POLICY ON ACCEPTANCE OF EMPLOYER CONTRIBUTIONS.

EMPLOYER (Name and Address)

Lewis County (Supervisors)

360 NW North St.

Chehalis, WA 98532

By: *Andrew R. Melvick, own*

Title: Chair - BOCC

Date: 5/12/26

LABOR ORGANIZATION (Name and Address)

Teamsters

217 E Main St.

Centralia, WA 98531

By: *Brian Blausdell*

Title: Secretary-Treasurer

Date: 05/06/26

APPROVAL OF TRUSTEES This subscription agreement has been accepted by the Retiree's Welfare Trust:

By: _____ Title: _____ Date: _____

RETIREE'S WELFARE TRUST

POLICY ON ACCEPTANCE OF EMPLOYER CONTRIBUTIONS

It is hereby declared to be the policy of the Retiree's Welfare Trust to accept as Employer contributions only payments made in accordance with a Collective Bargaining Agreement and/or Written Agreement, which is not detrimental to the Plan.

Accordingly, a Collective Bargaining Agreement and/or Written Agreement which:

- Does not require monthly contributions to be made on behalf of all persons who perform work in the classifications or categories covered in such Collective Bargaining Agreement; or
- Requires a minimum waiting period of employment before contributions are owing; or
- Limits employees on whose account monthly contributions are to be made to those who are compensated for more than eighty (80) hours per month,

will be deemed to be detrimental to the Retiree's Welfare Trust and said contributions will not be acceptable.

The foregoing is only an illustration of Collective Bargaining Agreement and/or Written Agreement provisions, which the Trustees have deemed to be detrimental to the Plan and should not be considered as an all-inclusive list of all such types of provisions.

The determination of whether or not a Collective Bargaining Agreement and/or Written Agreement is detrimental to the Plan shall be made by the Trustees in their sole discretion.

NOTE: *There is a separate policy on acceptance of employer contributions in the Food Processing Industry. A copy may be obtained from the Trust Administrative Office.*

Retiree's Welfare Trust

2323 Eastlake Avenue East

Seattle, WA 98102

(206) 329-4900

BOCC AGENDA ITEM SUMMARY

Resolution: 26-154

BOCC Meeting Date: May 12, 2026

Suggested Wording for Agenda Item:

Agenda Type: Deliberation

Approve a collective bargaining agreement (Appendix 103) for Teamsters Local #252, representing Lewis County Supervisors, for January 1, 2026, through December 31, 2028

Contact: Angie Hodge

Phone: 360-740-1408

Department: HR - Human Resources

Description:

Approve a collective bargaining agreement (Appendix 103) for Teamsters Local #252, representing Lewis County Supervisors, for January 1, 2026 through December 31, 2028

Approvals:

User	Status
PA's Office	Approved

Publication Requirements:

Publications:

Additional Copies:

Michelle Sabin, Michelle Sauter, Vanessa Ruelas, Becky Butler, Grace Jimenez, Graham Gowing, Rudy Rodriguez, Angie Hodge, Geoff Soderquist, Gabe Anzelini, Meja Handlen, Rachel Lester, Mindy Brooks, Jeff Hursh

Cover Letter To: