- 7. The parties agree that nothing herein is intended to nor shall it be construed as creating recognition of or bargaining with a multi-employer bargaining unit other than those already recognized by the Local Union and limited to the geographical jurisdiction of the Local Unions.
- 8. This Agreement shall remain in full force and effect through April 30, 2019, unless either party shall desire a change or termination of this Agreement and shall file notice in writing, to be sent by registered or certified mail, between sixty (60) and ninety (90) days prior to the expiration of this or any subsequent agreement. The EMPLOYER and the UNION agree to be bound by the area-wide negotiated contracts with the various Associations incorporated into this Agreement and shall remain bound to the incorporated agreements extending this Agreement for the life of the newly negotiated contract, if not notified within the specified period of time. Provided further that any agreements incorporated under this Agreement shall remain in full force and effect until those agreements have also been properly terminated pursuant to the terms set forth in each of the incorporated agreements and UNION and EMPLOYER agree that this Agreement shall remain in full force and effect if the incorporated agreements have not been terminated prior to this agreement's expiration.
- 9. The EMPLOYER acknowledges and accepts the facsimile signatures on this contract as if they were the original signatures The EMPLOYER further acknowledges receipt of a copy of the complete COLLECTIVE BARGAINING AGREEMENT.

OULLOTTEL DATOMINING AGNITHMENT.	
IN WITNESS WHEREOF, and in consideration good and valuable consideration, this Memoran Sect. 2021.	of the mutual promises of the parties hereto, and other ndum of Agreement was entered into this day of
ACCEPTED:	
LABORERS' LOCAL UNION NO. 177	Piney Cropb Contractor Name) Legar, Inc
Mily Kech (Business Managor)	(Signature)
	Angre brockmager - President (Namol & Title)
GREAT PLAINS LABORERS' DISTRICT COUNCIL	2310 But Concher Rd
and the same of th	(Address)
(Business Manager)	City, State & Zip Code)
	618-443-8333
	(Telephone Number)
	(Facsimile Number)
	83-3789218
	(Federal Employer Identification Number)