

**COMMITTEE ON MINISTRY**

**PRESBYTERY OF GENEVA, PC(USA)**

***Form 1a: Annual Approval of Terms of Call***

The congregation of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Church, a member of the Presbytery of Geneva, PC(USA), hereby approves the following terms of call for their installed pastor \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ for the calendar year \_\_\_\_\_\_\_\_\_\_\_\_\_, as approved at a congregational meeting on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_. This call is to full time / \_\_\_\_\_\_\_\_\_\_\_\_\_\_ service (specify if not full time). This continues a call which began on \_\_\_\_\_\_\_\_\_\_.

The pastor’s responsibilities **are / are not** the same as last year’s. (If different, please specify on p. 2.)

Pastor’s compensation: (see Presbytery Minimum worksheet for current year for comparison):

1. **EFFECTIVE SALARY**

**Cash Salary** $\_\_\_\_\_\_\_\_\_\_\_\_\_

 **Housing Allowance**/Fair Rental Value of Manse $\_\_\_\_\_\_\_\_\_\_\_\_\_

 **TOTAL EFFECTIVE SALARY (TES)** $\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **ADDITIONAL REQUIRED PAID COMPENSATION**

**SECA (Social Security) offset** 7.65% of TES $ \_\_\_\_\_\_\_\_\_\_\_\_\_

 (required for installed positions, recommended of others)

 **Travel Allowance:** $ \_\_\_\_\_\_\_\_\_\_\_\_\_

(all church mileage vouchered at current IRS rate for business)

 **Study Leave:** $ \_\_\_\_\_\_\_\_\_\_\_\_\_

 **Professional Expenses:**(vouchered) $ \_\_\_\_\_\_\_\_\_\_\_\_\_

 **Pension:** (10% of TES) $ \_\_\_\_\_\_\_\_\_\_\_\_\_

**Medical:** $ \_\_\_\_\_\_\_\_\_\_\_\_\_

* Congregational Pastor’s Package(16% of TES)
* Transitional Pastor’s Participation (33% of TES)

**Other** (use p. 2 if necessary) ): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ $ \_\_\_\_\_\_\_\_\_\_\_\_\_

 **TOTAL PACKAGE:**  $ \_\_\_\_\_\_\_\_\_\_\_\_\_plus mileage

1. **REQUIRED BENEFITS**

**Study Leave time** \_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Vacation time** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 **Paid Family Leave** \_\_\_\_\_\_\_\_\_\_\_\_\_\_

These terms of compensation **are / are not** the same as last year’s. If different, the church has notified the Board of Pensions (please initial). \_\_\_\_\_\_\_\_\_\_

Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Clerk of Session Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Pastor Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_ for Committee on Ministry Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Include additional “Other” terms items here:

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ $

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ $

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ $

 TOTAL OTHER: $