

Form F-1: 2009 Compensation Form
Committee on Ministry – Presbytery of Tampa Bay

The _____ Presbyterian Church, located in _____, Florida, Presbytery of Tampa Bay, recommends that these terms be approved (or) changed for Rev./Mr./Mrs./Ms. _____. The date of the congregation/session meeting making this request is _____. The effective date is _____.

Check all that apply: Pastor, Co-Pastor, Associate Pastor, Certified Christian Educator, Associate Certified Christian Educator, Designated Pastor, Stated Supply, Interim Pastor, Interim Associate Pastor, Parish Associate, Commissioned Lay Pastor, Other: _____.

Full-time (50 hours per week on duty), Part-time (_____ number of hours per week)
 The church will pay all moving expenses (or) expenses up to \$_____.

- Line 1: \$_____ **Annual Cash Salary:** regular payroll, salary supplements
- Line 2: \$_____ **Housing Allowance:** utilities, mortgage payments, real estate taxes
- Line 3: \$_____ **Deferred Income:** IRS 403b Plan, Retirement Savings Plan
- Line 4: \$_____ **Special:** dental or life insurance, unvouchered allowances, loans*
- Line 5: \$_____ **Medical/Misc:** IRS 125 Plan contributions only
- Line 6: \$_____ **Fair Rental Value of Manse:** must be at least 30% of Lines 1–5
- Line 7: \$_____ **Total Effective Salary:** Lines 1-6..... *Minimum is \$39,000*
- Line 8: \$_____ **Board of Pensions Dues:** 31.5% of Line 7 (for full-time positions)
- Line 9: \$_____ **Continuing Education:** study leave expenses *Minimum is \$1,200*
- Line 10: \$_____ **Auto/Professional:** business expenses, auto vouchers at IRS mileage rate
- Line 11: \$_____ **Social Security:** 7.65% of Lines 1+2+4+5+6
- Line 12: \$_____ **Medical:** IRS 105 Plan reimbursements only
- Line 13: \$_____ **Total Cost to Church:** Lines 7-13
- Line 14: **Study Leave:** _____ weeks per year *Minimum is 2 weeks*
- Line 15: **Vacation Leave:** _____ weeks per year *Minimum is 4 weeks*
- Line 16: **Sabbatical Leave:** _____ weeks after _____ years

*NOTE: The terms of call are listed above. All other financial agreements (loans, etc.) must be attached to this form and approved by the minister, congregation and Committee on Ministry.

Signature	Telephone
_____ Minister/Educator/Candidate.....()	_____
_____ Search/Personnel Committee Chair.....()	_____
_____ Clerk of Session.....()	_____
_____ Committee on Ministry Chair.....()	_____
_____ Stated Clerk.....()	_____