



Definition of Compensation, Benefits, and Responsibilities of the Pastor

Prepared by _____

for the Reverend _____

for the period: _____ to _____

A. Compensation

The congregation will provide the following annual compensation:

- | | |
|--|----------|
| 1. Base Salary | \$ _____ |
| 2. Housing Allowance (if provided) | \$ _____ |
| 3. Self-employed Social Security payment allowance (if provided) | \$ _____ |
| 4. If a parsonage or other housing is provided: | |
| a. Utilities allowance | \$ _____ |
| b. Furnishings allowance | \$ _____ |
| c. Housing equity allowance | \$ _____ |

B. Retirement and Other Benefits

The congregation will sponsor the pastor in the Retirement and Other Benefits Program of the Evangelical Lutheran Church in America, which provides retirement, disability, survivor, and medical-dental coverage. (Sponsorship will include medical-dental coverage for the pastor's spouse and children unless they have other employer-provided group medical insurance coverage and the pastor consents to waiving medical-dental coverage for them under the Portico Benefits Program.)

1. ELCA Retirement at _____% of defined compensation
2. ELCA Medical and Dental Insurance (check one below):

<input type="checkbox"/> a. Member only	<input type="checkbox"/> c. Member and children	<input type="checkbox"/> e. Coverage waived
<input type="checkbox"/> b. Member and spouse	<input type="checkbox"/> d. Member, spouse, and children	

3. Other insurance or benefits: _____ \$ _____
 _____ \$ _____

C. Expenses

The congregation will provide for the following expenses related to this pastor's ministry.

1. Automobile and travel allowance \$ _____
2. Other professional expenses \$ _____
3. Expenses for official meetings of the synod, as reimbursed \$ _____
4. Continuing education \$ _____
 (\$1,000 recommended; minimum \$700 from calling source)
5. Other (_____) \$ _____

6. Pay the moving expenses to this field of service as follows: _____

D. Agreement

1. Vacation time of _____ per year, including _____ Sundays;
2. Continuing education time of _____ weeks per year (recommended minimum of two weeks per year that may be accumulated up to three years, as reflected in a continuing education agreement developed by the pastor and congregation council);
3. Participation in a First Call Theological Education Program, where applicable;
4. Ongoing care through a Mutual Ministry Committee;
5. Up to two months of continued salary, housing, and contributions to the ELCA Pension and Other Benefits Program in a 12-month period in the event that the pastor is physically or mentally disabled*; and
6. Where applicable, parental leave up to _____ weeks with full salary, housing, and benefits.

* Provision may be made for further unpaid time for disability recovery as agreed by the congregation, but with the stipulation that unused accumulated sick leave will not be compensated at the end of this call.



Definition of Compensation, Benefits, and Responsibilities of the Pastor (continued)

A description of the particular responsibilities of this position may be attached to this "Definition of Compensation, Benefits, and Responsibilities."

Signatures are required.

E. Other Provisions

Special emphases of the pastor and special encouragement by the congregation:

1. During this time period, the pastor will give special attention in ministry to the following:

- a. _____
- b. _____
- c. _____
- d. _____
- e. _____

2. The congregation will encourage this pastor's ministry in the following ways:

- a. _____
- b. _____
- c. _____
- d. _____
- e. _____

F. Other Matters

(Such as accountabilities, service on synodical or churchwide boards and committees, work in church-camp programs, or other such details) _____

We, the undersigned, certify that the necessary approvals of the congregation and congregational council have been granted for the provisions set forth above. This statement has been reviewed and complies with the minimum compensation guidelines of the Southeastern Iowa Synod.

Bishop's Representative

Congregation President

Date

Council Secretary

Date

I certify that I accept the above statement:

The Reverend _____ Date of Signature: _____

NOTE: Retain original in records of the congregation. Make a copy for the pastor. As a matter of information, send a copy to the synodical office. A description of the particular responsibilities of this position may be attached to this "Definition of Compensation, Benefits, and Responsibilities." (Rev 12/6/06)