## PRESBYTERIAN CHURCH (U.S.A.) – PRESBYTERY OF CARLISLE Pastoral Call Form

The Congregation of (Name of Church)	of ( City and State)	(Pin #)	being well satisfied
with your qualification for ministry and confident that	at we have been led to each othe	er by the Holy Spirit as	one whose service will be
profitable to the spiritual interests of our church and	d fruitful for the Kingdom of our L	ord, earnestly and sole	mnly calls you:
(Name)	to undertake the office of	of	of this congregation,
(Name)beginning datepromising you in t	he discharge of your duty all pro	per support, encourage	ment and allegiance in the
Lord.		F	grand and grand grand grand and grand gran
2014.			
So that you may be free to devote yourself full-time obligate ourselves to pay you yearly, in regular mo you, on a yearly basis, additional items as enumer you annually the adequacy of this compensation.	nthly payments, all items noted i	n lines 1-4 below. Furth	er, we promise to provide
Effective Salary			
1. Annual Cash Salary (including employee's contributions to 403 (b) plans, tax sheltered annuity plans)			¢
2. Housing, utility and furnishings allowances			Ψ ¢
3. Employing organization contributions to 403(b) plans, tax-sheltered annuity plans.*			Ψ ¢
*3a. if any part or all of the Employing Organization contribution shown on Line 3 is a "match" of an electi			Ψ
		is a match of an electr	ve contribution by a
Pastor, the <u>matching</u> amount must be shown on <u>Li</u>			Ф
4. Bonuses, overtime pay, unvouchered professional expenses, gifts from employing organizations			\$
5. Other allowances (for example medical deductible, SECA in excess of 7.65% of Effective Salary)			\$
6, Manse Value- (where applicable) Do not Include Utilities paid by the church			, \$
(Must be <u>at least</u> 30% of Lines 1-5 (do not incl	<u>lude line 3a)</u> for members residin	ig in employer provided	housing)
7. TOTAL EFFECTIVE SALARY (Lines 1-6 DO N	IOT INCLUDE LINE 3a)		\$
7a. Board of Pensions Effective Salary- (Line 7- minus line 3a- Employer Contributions)			\$
8. Board of Pensions Benefit Plan- 39% Effective	ve Salary (line 7a)		\$
8a). Group Plan Coverage Premiums (i.e Dental	Insurance)		\$
Reimbursable Amounts and Allowances			
<ol><li>Travel Reimbursement (vouchered reimbursab</li></ol>	le at current IRS rate)		\$
10. Continuing Education Allowance (vouchered)			\$
11. Books /Other Professional Expenses (voucher	ed reimbursable)		\$
12. SECA (Social Security Offset) - typically 7.65%	of Effective Salary (Line 7a)		\$
TOTAL TERMS OF CALL (lines 7-12- DO NOT INCLUDE LINE 7A)			\$
Moving Expense (One-time Payment)			\$
<u>Other</u>			
Vacation Continuing Education	n Leave Spi	iritual Renewal	
Family Medical Leave: a minimum of 12 weerks pa	aid Family Medical Leave per G-2	2.0804.	
In testimony whereof we have subscribed our nam	es this date Signatu	ires of Pastor Nominatir	na Committee
in testimony whereof we have subscribed our ham	es triis dateOignato	nes of Fastor Norminati	ig Committee.
Having moderated the congregational meeting which exbeen made in all respects according to the rules laid do	ktended a call to	for ministerial service	es, I do certify that the call has
authorized to do so by vote of the	Presbyterian Chur	ch (U.S.A.)	
Name of Moderator	Signature		

## **CERTIFICATION OF THE CALL**

## A. BY THE CHURCH'S PRESBYTERY

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1. ACTION OF THE COMMISSION ON MINISTRY
This call has been reviewed by the Commission on Ministry. The Commission recommends that Presbytery approve (not approve) this call.
Date of ActionChairperson
2. ACTION BY THE PRESBYTERY
This call was approved by the Presbytery of <u>CARLISLE</u>
Date of Action Stated Clerk
BY THE MINISTER'S/CANDIDATE'S PRESBYTERY
1. ACTION OF THE COMMITTEE ON MINISTRY
This call has been reviewed by the Committee on Ministry. The Committee recommends that the Presbytery finit expedient (not expedient) to release
to accept this call.
Date of Action Chairperson
2. ACTION BY THE PRESBYTERY
The Presbytery of hereby finds
it expedient (not expedient) to release to accept this call and therefore has placed (has not placed) this call in the minister's/candidate's hands.
Date of Action Stated Clerk
ACCEPTANCE OF THE CALL
This is to certify that I have received and accepted the call.
Date of AcceptanceSignature of Minister/Candidate