

2024 Presbytery of South Louisiana

Terms of Service for an Ordained PCUSA Pastor in Temporary Service

The \_\_\_\_\_ Presbyterian Church (USA) of (location) \_\_\_\_\_ belonging to the Presbytery of South Louisiana, being well satisfied with your qualifications for ministry and confident that we have been led to you by the Holy Spirit as one whose service will be profitable to the spiritual interests of our church and fruitful for the Kingdom of our Lord, earnestly and solemnly calls you (name) \_\_\_\_\_ to undertake the office of \_\_\_\_\_ this congregation  
 That you may be free to devote yourself \_\_\_\_\_ Full-time (35 hours per week or more, according to the Board of Pensions) \_\_\_\_\_ Part-time \_\_\_\_\_ (Number of hours per week) to the ministry of the Word and Sacrament among us, we promise and obligate ourselves to pay you the amounts below:

Service: <input type="checkbox"/> Interim <input type="checkbox"/> Transitional <input type="checkbox"/> Stated Supply <input type="checkbox"/> Other	The length of this term is _____, from _____ to _____.
Is the pastor Retired? <input type="checkbox"/> Yes <input type="checkbox"/> No	

**INCOME**

(Income subject to SECA calculation)

1. Annual Cash Salary	\$ _____
2. Housing /Utilities/Manse	\$ _____
3. Total SECA Income (Add lines 1+2):	\$ _____

(Income NOT subject to SECA)

4. Deferred Compensation (eg. 403(b) employee contributions, etc)	\$ _____
5. Other (specify) _____	\$ _____
6. TOTAL EFFECTIVE SALARY (Add lines 3+4+5):	\$ _____

**BENEFITS AND PENSION**

**please use the BOP compensation calculators to determine the most accurate amounts for a. and b. below**  
<https://www.pensions.org/what-we-offer/employer-guidance/calculators>

7. CHOOSE ONE OF THE FOLLOWING 4 OPTIONS: (see accompanying worksheet for eligibility criteria)

a. Paid to Board of Pensions for Pastor's Participation plan	\$ _____
b. Paid to Board of Pensions for Minister's Choice plan	\$ _____
c. Paid to Board of Pensions for Individual Benefit Choices Plan*	\$ _____
d. Paid to Board of Pensions for Post-Retirement Service Dues*	\$ _____
*See guidance notes to determine these amounts	
8. Paid to Board of Pensions for Optional Benefits (specify...eg. Dental etc.) _____	\$ _____
9. TOTAL PAID TO THE BOARD OF PENSIONS (Add lines 7+8):	\$ _____

**ALLOWANCES:**

10. SECA tax allowance, up to 50% (7.65% x line 3)	\$ _____
11. Other Allowances (specify)(eg. Employer 403(b) match) _____	\$ _____
12. TOTAL ALLOWANCES (Add lines 10+11):	\$ _____

**REIMBURSABLE EXPENSES:**

13. Automobile	\$ _____
14. Continuing Education (minimum \$250.00)	\$ _____
15. Professional	\$ _____
16. Other (specify) <i>e.g cell phone, Reimbursed Moving Expenses</i>	\$ _____

17. TOTAL REIMBURSABLE EXPENSES BUDGETED (Add lines 13+14+15+16):	\$ _____
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18. TOTAL COST TO CHURCH (Add lines 6+9+12+17):	\$ _____
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**OTHER BENEFITS:**

Vacation \_\_\_\_\_ weeks (PSL minimum of 4 weeks \*For 1 year contracts)

Study leave \_\_\_\_\_ weeks (PSL minimum of 2 weeks \*For 1 year contracts)

Other (specify) \_\_\_\_\_

**APPROVAL:**

The members of this session, in a session meeting on \_\_\_\_\_ (date), reviewed and approved the above terms of service for \_\_\_\_\_, effective \_\_\_\_\_ (date).

The Terms of Service will be reviewed for renewal at least yearly after a performance review, unless specifically changed by a vote of the session. For tax purposes, changes are effective on the date they are approved by the session. They are not retroactive, so please act promptly.

\_\_\_\_\_  
Clerk of Session or Congregational Witness          Date

\_\_\_\_\_  
Teaching Elder          Date

\_\_\_\_\_  
COM Moderator or General Presbyter          Date