

# ALABAMA-WEST FLORIDA CONFERENCE

## Pastor Compensation Form

Effective dates: \_\_\_\_\_

(For pension purposes, compensation dates should be a 12-month period, even if a change is expected)

Name of Pastor: \_\_\_\_\_ Social Security No. \_\_\_\_\_

Home Address: \_\_\_\_\_

Home Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

Charge Name: \_\_\_\_\_

List Church Name(s) and Number(s): \_\_\_\_\_

1. **Salary paid by Charge** \$ \_\_\_\_\_

This amount **includes** base pay, equitable compensation from the Conference and non-accountable allowances. This amount is before any voluntary employee reductions, such as pension/retirement deductions 403(b) plans and written cafeteria plan deductions.

2. **Utilities or Parsonage Exclusion** \$ \_\_\_\_\_

**Do Not** include any amount on this line if you do not live in a parsonage and receive a housing allowance.

3. **Total Compensation** \$ \_\_\_\_\_

Add lines 1 and 2.

4. **Travel Reimbursement** \$ \_\_\_\_\_

Must be on a line item in the Church budget and accessed through a voucher. This is **not** a part of the pastor's compensation, but an expense account for doing ministry. *If travel is not reimbursed by voucher, travel must be included in Line 1.*

### Housing Information

Is a parsonage provided for the pastor? Yes \_\_\_\_\_ No \_\_\_\_\_

Is a housing allowance provided? Yes \_\_\_\_\_ No \_\_\_\_\_

*If yes, how much?* \$ \_\_\_\_\_

### Signatures:

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

Charge SPRC Chair: \_\_\_\_\_ Date \_\_\_\_\_

Charge Treasurer: \_\_\_\_\_ Date \_\_\_\_\_

District Superintendent: \_\_\_\_\_ Date \_\_\_\_\_

## Pastor Compensation Worksheet

1. Church Name \_\_\_\_\_ Church Number \_\_\_\_\_

1. Pastor's Compensation \_\_\_\_\_
2. Utilities or Parsonage Exclusion \_\_\_\_\_
3. **Total** (add lines 1 and 2) \_\_\_\_\_
4. Travel Reimbursement \_\_\_\_\_
5. Housing Allowance (if no parsonage) \_\_\_\_\_

2. Church Name \_\_\_\_\_ Church Number \_\_\_\_\_

1. Pastor's Compensation \_\_\_\_\_
2. Utilities or Parsonage Exclusion \_\_\_\_\_
3. **Total** (add lines 1 and 2) \_\_\_\_\_
4. Travel Reimbursement \_\_\_\_\_
5. Housing Allowance (if no parsonage) \_\_\_\_\_

3. Church Name \_\_\_\_\_ Church Number \_\_\_\_\_

1. Pastor's Compensation \_\_\_\_\_
2. Utilities or Parsonage Exclusion \_\_\_\_\_
3. **Total** (add lines 1 and 2) \_\_\_\_\_
4. Travel Reimbursement \_\_\_\_\_
5. Housing Allowance (if no parsonage) \_\_\_\_\_

4. Church Name \_\_\_\_\_ Church Number \_\_\_\_\_

1. Pastor's Compensation \_\_\_\_\_
2. Utilities or Parsonage Exclusion \_\_\_\_\_
3. **Total** (add lines 1 and 2) \_\_\_\_\_
4. Travel Reimbursement \_\_\_\_\_
5. Housing Allowance (if no parsonage) \_\_\_\_\_

5. Church Name \_\_\_\_\_ Church Number \_\_\_\_\_

1. Pastor's Compensation \_\_\_\_\_
2. Utilities or Parsonage Exclusion \_\_\_\_\_
3. **Total** (add lines 1 and 2) \_\_\_\_\_
4. Travel Reimbursement \_\_\_\_\_
5. Housing Allowance (if no parsonage) \_\_\_\_\_