

Presbytery of Great Rivers  
**2022 CONTRACT**  
**TRANSITIONAL MINISTRY / TEMPORARY SUPPLY / CLP**  
*(please complete ALL fields)*

Pastor's Name: \_\_\_\_\_

Church & City: \_\_\_\_\_

Ordination Date: \_\_\_\_\_ Ordained by (Denomination) \_\_\_\_\_

Transitional Training Completed:  Week 1  Week 1 & 2  NONE

**POSITION IS:**

Full-Time OR  Part Time: Percent  %

Transitional Teaching Elder OR  Commissioned Lay Pastor OR  Temporary Supply

Begin Date: \_\_\_\_\_ End Date: \_\_\_\_\_

Level 1 Less than 4 years ordained ministerial experience: minimum total effective salary **\$46,497**

Level 2 4 or more years ordained ministerial experience: minimum total effective salary **\$50,063**

CLP Minimum Total Effective Salary for a Full-time Commissioned Lay Pastor: **\$37,195**

Effective salary for a call or contract with an ordained pastor must meet current presbytery minimums.

For a part time call or contract, the dollar amount allowed for continuing education may be prorated. However, time allowed for vacation and continuing education must meet the full minimum.

**A. EFFECTIVE SALARY**

- |                                                                                 |          |
|---------------------------------------------------------------------------------|----------|
| 1. Cash Salary (12-month equivalent prior to any elective deductions)           | \$ _____ |
| 2. PCUSA Fidelity 403B (church contribution)                                    | \$ _____ |
| 3. Manse Value (fair rental value per year including any church paid utilities) | \$ _____ |
| 4. Housing Allowance (if applicable)                                            | \$ _____ |
| 5. SECA - Self-Employment Contributions Act (if applicable)                     | \$ _____ |
| 6. BOP Optional Coverage                                                        | \$ _____ |
| 7. <b>TOTAL EFFECTIVE SALARY</b>                                                | \$ _____ |
- Effective Salary Date: \_\_\_\_\_

**B. BENEFITS (Paid by Congregation)**

1. **BOP Coverage**  YES OR  NO  
*If YES:*  Full Time (35 hours of more) OR  Part Time (20 – 34 hours) OR  Part Time (0 – 19 hours)

For details about co-pays or coverage level go to [www.pensions.org](http://www.pensions.org) Est: \$

2. **Vacation:**

**Minimum** of Four weeks including four Sundays  
 OR additional: \_\_\_\_\_

3. **Maternity/Paternity Leave:**

**Minimum** two months paid **maternity** leave or two weeks paid **paternity**.  
 OR additional: \_\_\_\_\_

**C. PROFESSIONAL REIMBURSABLE EXPENSES** (paid by congregation)

1. **Mileage Reimbursement** vouchered at the current IRS allowable rate \$ \_\_\_\_\_

2. **Continuing Education**

a. Reimbursable expenses (travel, lodging, registration fees, materials) \$ \_\_\_\_\_  
(**Minimum** \$1000/year accumulative to 3 years)

b. **Amount of Time:**

**Minimum** 2 weeks/year including 2 Sundays, accumulative to 3 years

**OR** additional: \_\_\_\_\_

3. **Reimbursable Professional Expense**

(receipts **MUST** be provided to church treasurer) \$ \_\_\_\_\_

**D. TERMINATION OF CONTRACT**

The following language (or more generous terms) must be included with each contract.

\_\_\_\_\_ Should this agreement be terminated prior to its expiration, the pastor shall be provided full compensation and benefits for \_\_\_\_\_ (30-60-90) days from the date of notification of termination, or until the next pastoral call, whichever occurs earlier. The pastor may terminate the agreement with 30 days written notice, forfeiting any compensation beyond that date. (If left blank, the **DEFAULT** is 60 days)

\_\_\_\_\_ Alternate provisions for termination. (Specify)

---

---

---

**E. DATES OF ACTION & SIGNATURES**

I (Pastor/CLP) will submit to and operate under the rules of the constitution of the Presbyterian Church (USA). I will receive the training in Presbyterian Polity offered by the Presbytery of Great Rivers (if applicable).

The Constitution of the Presbyterian Church (U.S.A.) requires an annual review of the adequacy of pastoral compensation including conference(s) with the pastor by a responsible committee, and approval by the Session:

**Date of conference** with Pastor/CLP: \_\_\_\_\_

**Date of Session action** and recommendation: \_\_\_\_\_

**Clerk of Session** (signature required): \_\_\_\_\_

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

**Pastor / CLP** (signature required): \_\_\_\_\_

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

**COM Chair** (signature required): \_\_\_\_\_

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