

**INITIAL DEFINITION OF COMPENSATION, BENEFITS AND EXPENSES OF THE  
ROSTERED LEADER  
(To be reviewed annually)**

Prepared by:

For:

For the period: \_\_\_\_\_ to \_\_\_\_\_

A. COMPENSATION

The congregations will provide the following annual compensation:

- 1. Base Salary ..... \$\_\_\_\_\_
- 2. Shelter (check one)
  - a. Cash Housing Allowance ..... \$\_\_\_\_\_
  - or
  - b. Parsonage with all utilities paid by congregation, plus, if applicable
    - i. Furnishings Allowance ..... \$\_\_\_\_\_
    - ii. Housing Equity Allowance ..... \$\_\_\_\_\_
- 3. Self-employed Social Security Allowance ..... \$\_\_\_\_\_

B. PENSION AND OTHER BENEFITS

The congregation will sponsor the rostered leader in the Pension 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 rostered leader's spouse and children unless they have other employee-provided group medical insurance coverage and the rostered leader consents to waiving medical-dental coverage for them under the ELCA Pension and Other Benefits Program.)*

- 1. ELCA Pension at 14% of Defined Compensation..... \$\_\_\_\_\_
- 2. ELCA Medical-and-Dental Insurance (check) ..... \$\_\_\_\_\_
  - a. member only            c. member and children            e. coverage waived
  - b. member and spouse    d. member, spouse, and children
- 3. Disability/Survivor/Other ..... \$\_\_\_\_\_
- 4. Other benefits ..... \$\_\_\_\_\_
 

..... \$\_\_\_\_\_

*Grounded, Growing, Giving, Graced*

C. EXPENSES/REIMBURSEMENTS

The congregation will provide for the following expenses related to this rostered leader's ministry:

- 1. Automobile and travel allowance ..... \$ \_\_\_\_\_  
or IRS mileage reimbursement rate, plus tolls and parking
- 2. Other professional expenses ..... \$ \_\_\_\_\_
- 3. Expenses for official meetings of the Synod ..... \$ \_\_\_\_\_
- 4. Continuing education (minimum \$1,000.00 per year) ..... \$ \_\_\_\_\_
- 5. Other ..... \$ \_\_\_\_\_

D. OTHER PROVISIONS

- 1. The Congregation shall pay the moving expenses of the newly called rostered leader and family;
- 2. Ongoing care through a Mutual Ministry or similar Committee;
- 3. Vacation time of one month per year, including four Sundays;
- 4. Continuing education time of two weeks per year, including two Sundays that may be accumulated up to three years – scheduling its use to be done in consultation with the Congregation Council;
- 5. Annual Synod Assembly expenses provided, including registration, room and board;
- 6. Participation in the Synodical Welcoming Event (an overnight in the fall) for rostered leaders that are new to this synod;
- 7. Participation in the Leadership Guild for all first call rostered leaders;<sup>1</sup>
- 8. Where applicable, maternity/paternal or family leave up to eight weeks with full salary, housing and benefits;
- 9. 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 rostered leader is physically or mentally disabled.<sup>2</sup>

E. EXPECTATIONS (USED PRIMARILY IN STAFF MINISTRIES OR IN CONGREGATIONS WITH SPECIAL NEEDS)

- 1. During this time period, the rostered leader will give special attention in ministry to the following:
  - (a) \_\_\_\_\_
  - (b) \_\_\_\_\_
  - (c) \_\_\_\_\_
  - (d) \_\_\_\_\_
  - (e) \_\_\_\_\_

*Grounded, Growing, Giving, Graced*

\*\*\*\*\*

<sup>1</sup>The Leadership Guild involves an annual four day event at the end of January for three years as well as regular gatherings with a colleagues group.

<sup>2</sup>Provisions may be made for further unpaid time for disability recovery as agreed to by this congregation but with the stipulation that unused accumulated sick leave will not be compensated at the end of this call.

2. The congregation will encourage and support this rostered leader in the following ways:

- (a) \_\_\_\_\_
- (b) \_\_\_\_\_
- (c) \_\_\_\_\_
- (d) \_\_\_\_\_
- (e) \_\_\_\_\_

We, the undersigned, certify that the necessary approvals of the congregation and congregation council have been granted for the provisions set forth above:

\_\_\_\_\_  
 ROSTERED LEADER  
 Circle – Minister of Word and Sacrament  
 Minister of Word and Service  
 Deacon                      Deaconess  
 Diaconal Minister      Deaconess

\_\_\_\_\_  
 CONGREGATIONAL PRESIDENT  
 DATE: \_\_\_\_\_

DATE: \_\_\_\_\_

**NOTE: Please send three signed copies, along with three signed copies of the Letter of Call to Synod Bishop, John S. Macholz, so that he may attest to these provisions and thus validate the Call.**

ATTESTED BY: \_\_\_\_\_  
   Bishop of the Upstate New York Synod

DATE OF SIGNING: \_\_\_\_\_

*Grounded, Growing, Giving, Graced*