



WHITewater VALLEY PRESBYTERY

TEMPORARY PASTORS

(STATED SUPPLY, COVENANT, BRIDGE, INTERIM, TRANSITIONAL,
VALIDATED SERVING IN A CONGREGATION)

2025 TERMS OF CALL (TOC)

Minister _____

Congregation _____

Starting Date for new Terms of Call _____ **Hours Per Week** _____

(Part-time/PT positions are prorated based on the minimums below which reflect a 40 hour work week.)

Specific Title _____

2025

Base Compensation		\$
Cash Salary		\$
Housing Allowance		\$
Salary and Housing Total	<i>Minimum Salary and Housing = \$58,968 Minimum if Manse and Utilities Provided = \$45,523</i>	\$
Other	<i>Bonuses, Unvouchered Allowances and Gifts = Cash Salary 403b Employee Contribution = Cash Salary</i>	\$
Total <u>Effective Salary</u> (items above)		\$
Additional Required Compensation		
(See Notes Below regarding PT or Exemptions)		
Board of Pensions for FT	<i>Transitional Package 43% of Effective Salary</i>	\$
Health Reimbursement Arrangement (HRA) for FT - \$2,000		\$
Vacation	<i>FT minimum 4 weeks, including 4 Sundays +15 years = 5 weeks, including 5 Sundays</i>	weeks
Continuing Education/Professional Development	<i>FT minimum 2 weeks; cumulative for up to 4 years</i>	weeks
Paid Family Leave	<i>FT minimum 12 weeks See "Ministry Together" at www.whitewatervalley.org</i>	weeks
Total Additional Required		\$
Reimbursable/Vouchered Expenses		
Continuing Education/Professional Development	<i>FT minimum \$1,500; cumulative for up to 4 years</i>	\$
Mileage/Auto	<i>FT minimum \$2,800 @ IRS established rate</i>	\$
Other Vouchered Expenses, including Moving Expenses		\$
Total Reimbursable/Vouchered Expenses	<i>FT minimum \$4,300</i>	\$
Additional Optional Benefits		
Social Security Offset/SECA Allowance (7.65% of Effective Salary)		\$

Please Note: This benefit is taxable, per IRS rules.		
Optional Board of Pensions	(rates at www.pensions.org)	
Vision		\$ _____
Dental		\$ _____
Supplemental Death		\$ _____
403b Employer Matching Contribution		\$ _____
TOTAL		\$ _____
Sabbatical Leave, after how many years of continuous service?		_____ years
Total Investment		\$ _____

Sessions, with the Presbytery’s concurrence, may terminate this contract with thirty days written notice.

The pastor may also terminate this contract with thirty days written notice and forfeit any payment beyond that for actual services in the thirty-day period.

Certification of Call

This is to certify that the Session and Congregation have voted to accept this call with the compensation listed.

Date of Session Approval _____ (Signed) _____
Clerk of Session

Board of Pensions Waiver

We have consulted and agree that the Congregational Pastors Package of the Board of Pensions is in the best interest of the congregation and the pastor. Our pastor’s spouse and family (if applicable) have medical coverage without the Transitional Plan of the Board of Pensions.

OR our pastor is exempt from Board of Pensions coverage because they are part-time and not scheduled to work more than 20 hours per week.

(Signed) _____ (Signed) _____
Pastor/Minister Clerk of Session

Health Reimbursement Arrangement (HRA) Waiver

We request a waiver from the Whitewater Valley Presbytery HRA program because:

- Our pastor is scheduled to work less than 30 hours per week.**
- Our congregation has an HRA in place with a qualified benefits manager and it meets or exceeds the Presbytery minimum of \$2000.**

(Signed) _____
Clerk of Session

Ministers of Word and Sacrament serving in Validated Positions in Congregations

We have read and agree to the covenant Regarding Validated Congregational Positions. (This document is available on www.whitewatervalley.org under Forms.)

(Signed) _____ (Signed) _____
Pastor/Minister Clerk of Session