

A CALL

CATAWBA PRESBYTERY

ASSOCIATE REFORMED PRESBYTERIAN CHURCH

WORLD WITNESS EMPLOYEE

That you may devote yourself wholly to the Ministry of the Word as you begin your ministry on the

_____ day of ______, 20____, we promise and obligate ourselves to:

1. Basic compensation: [Select a or b].

a.

- When a manse is provided
 - 1) Base Salary \$_____

Provide you with the free use of a manse with utilities, and insurance coverage, commonly called tenant homeowners, in an amount of not less than \$40,000 or an amount equal to the actual replacement value of the minister's owned contents.

- 2) Travel allowance of \$_____
- b. When a housing allowance is provided it may be divided to the best interest of the minister and shall provide
 - 1) Total Compensation of \$_____ which includes
 - a. Base Salary \$_____
 - b. Housing Allowance \$_____
 - c. Travel Allowance \$_____
- 2. Pay your moving expenses.
- 3. Pay into the Associate Reformed Presbyterian Retirement Plan Fund as prescribed by the General Synod.
- 4. Pay 100% of Synod's life, health and dental insurance for the pastor and his family, with the following proviso that if a minister's spouse has group insurance that covers her and/or their dependents for medical and/or dental insurance that it be permitted for the minister to participate and waive medical and/or dental insurance under the single rather than family category of insurance; and further, the pastor may also elect to remain under his wife's policy if he is covered as a dependent.

{Select a, b or c}

a. ____Provide Synod's life, and health and dental insurance package for the pastor and his family.

b.____Pastor waives _____ medical and/or _____dental coverage under Synod's group policy for his dependents who are covered under the spouse's group policy.

- c.____Pastor waives____medical and/or ____dental coverage under Synod's group policy for himself and his dependents who are covered under the spouse's group policy.
- 5. The Board provides the cost of Life, Long Term Disability and Accidental Death coverage as provided by and required by the General Synod
- 6. _____week[s] to be away for evangelistic or other church related meetings.
- 7. One week and expenses for continuing education
- 8. Review with you annually the adequacy of this compensation. As part of the review the Board shall be encouraged to consider an increase to the previous year's base compensation.
- 9. Grant you an annual vacation of <u>weeks</u>.
- 10. Expenses for the meeting of General Synod.
- 11. Other [List each item]
- 12. In the event of total disability, as defined in the Synod's insurance program, we promise:
 - a. _____To continue <u>for a minimum of three months</u> the provisions of this call awaiting commencement of benefits from Synod's insurance program.
 - b. _____If you are residing in the manse, and during the month following the terms outlined in
 "a" above, to assist you in relocating and to contribute <u>a minimum of up to one month's base</u>
 <u>salary</u> toward your relocation expenses.
 - c. ____Other [Attach]
- 13. In the event you should die during the terms of this call, we promise:
 - a. _____To continue the provisions of this call dealing with annual salary, housing, and group insurance for your immediate family <u>for a minimum of three months.</u>
 - b. _____If you are residing in the manse, and during the month following the term outlined in "a" above, to assist your immediate family in relocating and/or contribute <u>a minimum of up to</u> <u>one month's base salary</u> toward these relocation expenses.
 - c. ____Other. [Attach]

In testimony whereof we have respectively subscribed our names this _____day of ______

A. D.____.

ALL OFFICIAL CALLS TO BOARD OF WORLD WITNESS POSITIONS MUST BE SIGNED BY:

All members of the Board of World Witness issuing the call

CONFIRMATION OF A CALL CATAWBA PRESBYTERY

I,	having chaired the meeting of the Board of World Witness		
held at	on	at	
which a call was extended to		, for	
services as	, certify th	at the call has been made	
in all respects according to the Form of Ge	overnment of the Associate Re	eformed Presbyterian	
Church and the Rules of Procedure of Catawba Presbytery, and that the persons who signed the			
call were members in regular standing of t	the above-mentioned Board.		

Chairman of the Board Meeting

Date

OFFICIAL VOTE:

In Favor _____ Opposed _____

MEMBERS OF THE BOARD OF WORLD WITNESS	