CHURCH STAFF COMPENSATION _____ **2010**

(name of church – if "First", list location)

Occasionally sessions ask the presbytery about compensation packages for church staff members. In order to provide accurate information, the Committee on ministry and Committee on Representation ask that you fill out this form. Please include data for all church employees except ministers of the Word and Sacrament, commissioned lay pastors, and Certified Christian Educators (*do* provide data for Certified Associate Christian educators). Please check with your educator if you are not sure whether she or he is certified or the level of certification.

Position Title	Hrs per week	Salary	Board of Pensions (Y or N)	403b (Y or N)	Medical insurance available? (Y or N)	Medical insurance taken? (Y or N)	Unemployment insurance? (Y or N)	Other compensation (list type)	Paid vacation (# days)	Paid study leave (# days)	Study leave reimburse (list amount)	Other reimbursement (list type)

If necessary, please duplicate this form or continue information on back of this page.

IF THE CHURCH HAS NO EMPLOYEES in addition to a minister of the Word and Sacrament, commissioned lay pastor, or certified Christian educator, PLEASE LIST "NONE" AND SUBMIT FORM.

Submit completed form to: Presbytery of Cincinnati, 1323 Myrtle Ave., Cincinnati, OH 45206; fax: 513-221-6601; or email: mail@cpresby.org