This form is to be given to the District Superintendent by
December 1 or at charge conference

2009 Clergy Salary & Financial Package Form

Pastor Name _____ SS#_____ - _____ - _____

Charge_____

Full time years in NCNY Conference..... _____
Full time years in other UM Conference(s)..... _____
Full time years in other denomination(s)..... _____

Clergy Salary and Support Report
This form, including items 1 through 11 on the reverse side, is being used to report a change in the clergy salary or support package.

Effective date of salary change is _____

Acknowledgement
This form has been reviewed and approved by the church conference

Signature of Pastor: _____

Signature of Staff/Pastor Parish Relations Committee Chair _____

2009 MINIMUM SALARY SCHEDULE COMPUTATION-Select One:	Full Time	3/4 Time	1/2 Time	1/4 Time
a) Full members of Conference	$38,210	$28,658	$19,105	$9,552
b) Associate and Probationary members and Local Pastors with M.Div.	36,812	27,609	18,406	9,203
c) All other full-time pastors	34,483	25,862	17,2424	8,621
d) ADD TO (a), (b) OR (c): $300 per year of previous full-time service up to 18 years within the UM Church (**Maximum $5,400 supplement**) +	_____	_____	_____	_____
e) **MINIMUM SALARY + SERVICE YEARS SUPPLEMENT = TOTAL** =	_____	_____	_____	_____

This is the minimum amount that should appear on Line 3 Gross Salary on reverse side

Application for salary assistance should be made on the Salary Assistance Form found on the Conference website under: Council & Ministry Areas – Congregational Development
Application deadline is 9/15/2008.

Conference office use only:
Entered into data base_____ Transmitted to GBOPHB _____