

The Southern Methodist Church Ministerial Retirement Board

Quarterly Contribution Form

Pastoral Year August 1, \_\_\_\_\_ - July 31, \_\_\_\_\_

Church \_\_\_\_\_

Mailing Address \_\_\_\_\_

City, State, & Zip \_\_\_\_\_

Minister \_\_\_\_\_

Mailing Address \_\_\_\_\_

City, State, & Zip \_\_\_\_\_

Calculation of Base Salary and Annual Contributions

Amounts should be taken from the Church - Pastor Agreement Form

Total Support of Minister .....
LESS Parsonage Allowance ..... ( )
LESS Hospitalization Insurance ..... ( )
LESS Travel & Other Expenses Reimbursed ..... ( )
LESS Other Fringe Benefits or Salary Reductions ..... ( )

BASE SALARY .....
Church's Contribution (Base Salary \_\_\_\_\_ x .06) = .....
Minister's Contribution (Base Salary \_\_\_\_\_ x .03) = .....

The Minister's Contribution should be withheld from his salary by the church in the form of a salary reduction and sent to the Treasurer of the Ministerial Retirement Board along with the Church's Contribution each quarter.

Please circle the Quarter for which this contribution is being sent: First Aug. - Oct. Second Nov. - Jan. Third Feb. - April Fourth May - July

One quarter (1/4) of Church's Contribution ..... \$ \_\_\_\_\_

One quarter (1/4) of Minister's Contribution ..... \$ \_\_\_\_\_

One quarter (1/4) of Additional Salary Reduction Amount ..... \$ \_\_\_\_\_

Total Amount on check # \_\_\_\_\_ ..... \$ \_\_\_\_\_

Make check payable to "The Southern Methodist General Conference" and mail to: Rev. Dr. Paul D. Thigpen, Treasurer 245 Perryclear Street Orangeburg, SC 29115

This form should be completed in duplicate each quarter - one copy for your records; one copy returned with check.

All Payments Due Prior to the End of the Quarter to Qualify for Pro-Rata Shares for that Quarter