

**THE PRESBYTERY OF SOUTH ALABAMA  
Daphne, Alabama**

**MINISTER'S COMPENSATION REPORT TO  
THE COMMITTEE ON MINISTRY**

\_\_\_\_\_  
Minister's Name (Please Print)

\_\_\_\_\_  
Church Name (Please Print)

**YEAR 2019 COMPENSATION**

**BENEFITS TO MINISTER WITH A  
HOUSING ALLOWANCE:**

\_\_\_\_\_ Salary

\_\_\_\_\_ Housing Allowance

\_\_\_\_\_ Pension and Major Medical

Dental Plan

\_\_\_\_\_ Social Security (Indicate if 1/2 or all: \_\_\_\_\_ 1/2 \_\_\_\_\_ all)

\_\_\_\_\_ Deferred Compensation

\_\_\_\_\_ Other: Please indicate what this is:

\_\_\_\_\_ **TOTAL BENEFITS**

**BUSINESS EXPENSES FOR CHURCH TO HAVE MINISTER:**

\_\_\_\_\_ Travel Allowance

\_\_\_\_\_ Professional Expenses Reimbursement

\_\_\_\_\_ Continuing Education and Books

\_\_\_\_\_ Other - Please indicate what this is:

\_\_\_\_\_ **TOTAL EXPENSES**

\_\_\_\_\_ **TOTAL BENEFITS AND BUSINESS EXPENSES**