

CONFIDENTIAL INFORMATION SHEET

Long Term Disability and Pension Calculations

Employee's Name:	ID#.:
	ID#.: (last 6 digits of S.I.N.)
Effective Date of Salary:	_
TOTAL GROSS SALARY, which includes either:	
 Basic Salary PLUS Housing Allowance OR 	
 Basic Salary PLUS Fair Rental Value of Parsonage AND util if paid by the church on behalf of the member 	ities, A. \$
# OF PAY PERIODS (Weekly=52, Bi-weekly=26, Semi-monthly=2	24, Monthly=12) B
PENSION CONTRIBUTION PER PAY PERIOD	
 Employee portion -6% deducted from employee. (A divide 	ed by B x 6%) C . \$
• Employer portion - 6% matched by the employer. (A divide	ed by B x 6%) D . \$
TOTAL Pension Contribution per Pay Period: (C	+ D) E. \$
Pension Contributions are calculated by the Treasurer and sent in the end of the month. It is the record keepers' job to ensure they recanada Life does not verify whether the amount is accurate or not. Long Term Disability (LTD) Monthly premiums are determined be calculated using the following: Total Salary / 12 x .67 x .02707	eceive a monthly amount for each member.
TREASURER	
Church:	
Treasurer:	-
Email:	·····
Phone No: Do	ate:

Please complete this form and submit to CBAC whenever there is a change in salary or if you have a new employee.

IMPORTANT: Please return to: Karen Gunn, Pension and Benefits Manager

By email: <u>karen.gunn@baptist-atlantic.ca</u>
Or by mail: PO Box 6003, Moncton, NB E1C 0V7