

***** CONFIDENTIAL INFORMATION SHEET *****
for
LONG TERM DISABILITY & PENSION CALCULATIONS

Member's Name: _____

ID #: _____
(last 6 digits of SIN #)

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 utilities,
if paid by the church on behalf of the member

\$ _____

OF PAY PERIODS (Weekly= 52, Bi-weekly= 26, Bi-monthly= 24, Monthly= 12) _____

12% PENSION CONTRIBUTION PER PAY PERIOD

= _____

(Total Gross Salary multiplied by 12% divided by # of Pay Periods)

** Total Pension Contribution per month is determined by multiplying 12% Pension Contribution per Pay Period multiplied by the number of pays for the month. (ie: Bi-weekly have 10 months with 2 pays and 2 months with 3 pays). This contribution must be remitted to Sun Life Financial by the 10th of month following the deduction.*

**Long Term Disability Monthly premiums are determined by Great West Life however premiums can roughly be calculated using the following: Total Salary / 12 x .67 x .0207*

TREASURER

MEMBER

Name: _____

Name: _____

Address: _____

Address: _____

Postal Code: _____

Postal Code: _____

Church: _____

Phone No.: _____

Phone No.: _____

Date: _____

IMPORTANT:

Return completed form to: **Karen Gunn, Benefits Coordinator**
The Pension and Insurance Board
1655 Manawagonish Road
Saint John, NB E2M 3Y2 or by fax: (506) 635-0366 or karen.gunn@baptist-atlantic.ca