The Pension Fund (1969) of The Pentecostal Assemblies of Canada

ANNUAL EMPLOYER STATEMENT OF EARNINGS AND CONTRIBUTIONS

1. EMPLOYER/CHURCH NAME: _____

2. EMPLOYER/CHURCH I.D. No. _____

3. ADDRESS: _____

4. REPORTING PERIOD: This annual report is for the calendar year ending December 31, _____. Please make sure you only include earnings during which pension fund contributions were made.

5. NAME OF CONTACT PERSON: _____
(Person completing this form)

Earnings:

- The statement of earnings will include both the base salary and clergy housing allowance (or the fair rental value of the same as claimed by the clergy on the Income Tax Return)
- For non clergy, the statement of earnings will be the pensionable income.
- Please make sure you only include earnings during which pension fund contributions were made.

Minimum Contribution:

- Year one and two of the member's enrollment: 2.5% (Member) + 2.5% (Employer)
- Year three and four of the member's enrollment: 4% (Member) + 4% (Employer)
- After year four: 5% (Member) + 5% (Employer)

Credential holder ID Number:

If the member is a credential holder with the PAOC please include the member's credential number. Non-credential holders should enter the donor number that was assigned upon enrollment in the Pension Plan.

FOR NON CREDENTIALED STAFF MEMBERS					
NAME	**Donor ID #**	**Earnings**	**Member Contributions**	**Employer Contributions**	**TOTAL CONTRIBUTIONS**
FOR CREDENTIAL HOLDERS ON STAFF					
NAME	**Credential ID#**	**Earnings**	**Member contributions**	**Employer contributions**	**TOTAL CONTRIBUTIONS**

Signature on behalf of the Employer: _____

Date Signed: _____

Please mail this form to the attention of Karen Maier, PAOC, 2450 Milltower Court, Mississauga, ON or fax to 905-542-7313 before March 1.