



# The Episcopal Diocese of San Joaquin

The Central Third of California

## PAYROLL AUTHORIZATION 2025

Name of Employee: \_\_\_\_\_

Effective Date of Change: \_\_\_\_\_

Is this different from last year?  No  Yes

Monthly Salary contributed by diocese	\$ _____
Monthly Salary contributed by _____ Church	\$ _____
Monthly Salary contributed by _____ Church	\$ _____
SECA monthly contribution	\$ _____
Lay DC Plan Employer Contribution	\$ _____
HSA contribution by diocese	\$ _____
HSA employee portion monthly pre-tax contribution	\$( _____ )
RSVP [403(b)] monthly pre-tax employee contribution	\$( _____ )
Monthly amount to be designated as clergy housing allowance	\$ _____

\_\_\_\_\_  
Employee Signature Date

\_\_\_\_\_  
Supervisor's Signature (Treasurer if church level) Date

- New Assignment Notice Form needed?
- Housing Resolution needed?
- Report of Change in Compensation Form needed?
- Participant Change Form (Lay DC Plan) needed?
- Participant Change Form (Clergy RSVP Plan) needed?