## **Housing Equity Contribution Agreement**

## FOR SPONSORED PASTORS

A Sponsoring Employer Info	ormation		
Name of Sponsoring Employer			Employer ID
Email Address			Employer Phone
B Sponsored Employee Info	ormation		
Legal Name (First)	MI Last		XXX-XX- Social Security Number
C Housing Equity Contribut	tion Agreement (Complete	1 or 2.)	
□ Beginning (MM/DD/YYYY)  We will remit the following naccount:  Dollar amount \$	nonthly housing equity contri	butions to the above-n	amed employee's ELCA Retirement Plan
NOTE: The IRS sets annual limits more information.	for retirement plan contributi	ons. Visit EmployerLir	nk or contact the Portico Service Center for
2. ☐ Effective (MM/DD/YYYY) We terminate the housing eq	uity contribution for the emp	loyee named above.	
D Employer Signature			
housing equity contributions are a pastor's paycheck. Housing equity	voluntary retirement plan cor contributions are in addition rms and conditions of the ELG	ntribution from the en to compensation that	ned in this form. We understand that apployer and not a deduction from the is designated as housing allowance. We we know we can visit www.PorticoBenefits.org
Signature of Employer Representa	tive ( <b>Required</b> )		
Representative's Title		Daytime Phone	Date (MM/DD/YYYY)
Return this completed form to t	he Portico Service Center. In	complete or illegible	forms may be returned.
Portico Benefit Services 800 Marquette Ave., Ste. 1050 Minneapolis, MN 55402-2892			
800.352.2876 / 612.333.7651 F 612.334.5399			
mail@PorticoBenefits.org www.PorticoBenefits.org			

