

**2026 - CLERGY RETIREMENT CONTRIBUTION
 PAYROLL DEDUCTION AUTHORIZATION
 FOR RSVP ACCOUNT (WITH CPG) OR OTHER APPROVED PLAN MANAGER**

THIS FORM ESTABLISHES PAYROLL DEDUCTIONS ONLY – THE EMPLOYEE / EMPLOYER ARE RESPONSIBLE FOR ENROLLMENT IN A RETIREMENT ACCOUNT (WITH CPG OR OTHER PLAN MANAGER)

Employee Legal Name (last, first): _____

Social Security #: _____ Date of Birth: _____
 (mm/dd/yy)

Effective: The first pay date following payroll office’s receipt of completed form

<input type="checkbox"/> I choose to make personal contributions and have indicated the following amounts for either pre-tax or Roth (after tax). Deductions will begin the first pay date that follows submission of form to DioCal Payroll Office	DEDUCTION AMT. PRE-TAX	DEDUCTION AMT. ROTH
	BASE CONTRIBUTIONS % _____ PER PAYCHECK	AFTER-TAX BASIS BASE CONTRIBUTIONS % _____ PER PAYCHECK
Percentage of compensation contribution. Indicate the percentage of non-housing allowance compensation that you want to contribute to the plan. Percentage amounts withheld will adjust automatically with payroll fluctuations / changes in taxable compensation. OR Flat dollar amount contribution. Indicate the dollar amount of non-housing allowance compensation to be withheld per paycheck. Flat dollar contribution amounts will not adjust automatically with fluctuations in paycheck or compensation changes. 2026 maximum base contribution is \$24,500*	OR \$ _____ PER PAYCHECK	OR \$ _____ PER PAYCHECK
Catch-up contributions for those who wish to contribute more than the annual base contribution limit 2026 maximum catch-up contribution for those age 50+ is \$8,000* 2026 “super catch-up” contribution for those age 60-63 is \$11,250*	Catch-up contribution \$ _____ PER PAYCHECK	Catch-up contribution \$ _____ PER PAYCHECK
*Note for mid year start date: If you wish to reach the annual maximum contributions by Dec. 31 divide the max. amt. by the number of pay periods remaining for the year. There are 24 pay periods per year (2 per month). Refer to the annual payroll calendar for deadlines & remaining pay periods in the year The payroll system should automatically stop deductions when annual max. contribution has been reached.		

The above-named employee authorizes the Diocese to withhold the amount shown above from each paycheck. By signing below, we recognize that the payroll deductions are returned to the employer through the payroll invoice and the employee contributions are to be directed to the plan administrator in accordance with plan guidelines by the employer, not Diocese.

Employee signature: _____ Date _____

Employer signature: _____ Date _____

Employing Entity: _____ 3-digit Parish Code: _____

Organization name, city location (ie: St. Swithen’s, Oakland)

**Submit this form to employer for filing with Diocese of California Payroll Service
 as PDF attachment by email: sarahc@diocal.org**