MS-831: Jack, Joseph and Morton Mandel Foundation Records, 1980–2008.
Series C: Council for Initiatives in Jewish Education (CIJE). 1988–2003.
Subseries 6: General Files, 1990–2000.

Box	Folder
51	9

Operations Manual, 1993.

עת לעשות
A Time to Act

COUNCIL FOR INITIATIVES IN JEWISH EDUCATION

CIJE

OPERATIONS MANUAL

I. GENERAL ADMINISTRATION

1.1 Submission and Approval of Expenses

1.2 Printing Approvals

1.3 Meeting Expenses

1.4 Temporary Secretarial Support for Foundation Projects

1.5 Attending Conferences and Seminars

1.6 Telephone Guidelines

1.7 Telephone Calling Cards

1.9 Petty Cash

II. TRAVEL

2.1 Travel Expenses Policy for Personnel Traveling in the U.S. and Canada

III. PERSONNEL

3.1 Position Description Questionnaire

3.2 Consulting Agreements with Individuals or Firms

3.3 Consulting Agreements with Individuals or Firms

3.4 Vacation/Sick Time

IV. EQUIPMENT AND SUPPLIES

4.1 Approvals for Ordering Publications/Books

4.2 Installation of Services or Equipment for Philanthropic Programs

V. CIJE PROGRAM POLICIES

5.1 Scheduling of Meetings for Lead Communities

5.2 Written Communication with Lead Communities

5.3 Contact with Lead Communities

VI. CIJE PROGRAM POLICIES ?

6.1 Fund Raising Administration

VII. APPROVALS

VIII. FINANCIAL REPORTS

8.1 Budget

8.2 Submission of Comparable Financial Statements

I. PURPOSE

The purpose of this policy is to outline the general guidelines for submitting and obtaining approval for expenses.

II. PROCEDURE

A. All expenses should be submitted to the Office Manager of the CIJE, P. O. Box 94553, Cleveland, Ohio 44101 for approval and payment.

B. It is recommended that travel expense reports be submitted immediately after completion of a trip for prompt reimbursement.

C. For now, all expenses should be submitted on the travel expense form (CIJE 201). It is important to complete both sides of the form, providing clear and complete information.

   1. For telephone expenses, please submit your telephone bill with the CIJE calls highlighted or clearly marked. Indicate the person called or a brief notation on the purpose of the call.

   2. For office supplies or other incidental expenses, attach a separate sheet and list expenses.

   3. Attach all receipts to the expense form with a clear indication of what they are.

D. When paying for guests at a meal, please indicate on the back side of the form the person(s) you hosted and the purpose of your meeting. It is important that the documentation clearly set forth the business purpose of the expense. Where possible, when you have meals with other CIJE staff or consultants, please submit your expenses individually.

III. PREAPPROVAL FOR SELECTED EXPENSES

A. Several selected expenditures require preapproval. These include:

   1. Attendance at conferences and seminars (see Policy 1.5)

   2. Printing of documents (see Policy 1.2)

   3. Ordering Publications (see Policy 4.1)

   4. Capital expenditures including installation of services or equipment (see Policy 4.2)

5. Meeting expenditures for groups of 5 or more (see Policy 1.3)

B. The appropriate preapproval should be secured before making the expenditure. After the expense is incurred, please submit the travel expense form with the receipt(s) and you will be reimbursed promptly.

IV. EXPENDITURES FOR SECRETARIAL SUPPORT

These expenditures should be handled separately. See Policy 1.4 for details.

V. EXPENDITURES FOR PROFESSIONAL SERVICES

When it is necessary to hire professionals, they should be considered consultants. Procedures for hiring consultants are outlined in Policy 3.2.#

HIRING STAFF - PAUL MORACO HAS FORM.

FOR INSERTION IN: CIJE OPERATIONS MANUAL

SUBJECT: PRINTING APPROVALS

no. 1.2
effective 4/1/93
supersedes NEW

I. PURPOSE

The purpose of this policy is to outline the approvals procedure for the printing or copying of forms, letterhead, etc.

II. PROCEDURE

When there is a form, letterhead or other item that requires printing, this procedure should be followed. After the design or the concept has been approved, then follow this procedure to have the document printed.

A. Complete CIJE 103 (4/93). Exhibit A contains a blank form that should be machine copied and filled out.

B. Be sure to complete all blanks.

C. Printing requires obtaining three bids.

D. The office manager should include his/her recommendation.

E. The approval by the office manager ensures that the form has been completed, is clear, and is justified.

F. Avoid copying materials copyrighted by others. #

PRINTING APPROVALS FORM

Publication Title ______________________________

Description of Publication ______________________________

____

Proposed Use ______________________________

____

____

<u>Request to Quote</u>
Quantity Requested ______________ Time Frame for Use ______________

Comments ______________________________

____

____

TO BE COMPLETED BY OFFICE MANAGER:
<u>Bid Results</u>

1. Co. ______________ Amount ______________ $/copy ______________

   Comments ______________________________

   ____

   ____

2. Co. ______________ Amount ______________ $/copy ______________

   Comments ______________________________

   ____

   ____

3. Co. ______________ Amount ______________ $/copy ______________

   Comments ______________________________

   ____

   ____

RECOMMENDATION OF OFFICE MANAGER ______________________________

____

____

Submitted by ______________________________ Date ______________

Knowledge Center Approval ______________________________ Date ______________

Financial Approval ______________________________ Date ______________

Operations Approval ______________________________ Date ______________

Final Approval ______________________________ Date ______________

I. GENERAL POLICY

All meetings or functions which will be attended by 3 or more individuals and require expenditures exceeding $500 for such items as travel, meals, rooms or equipment rental generally must receive approval at least 30 days prior to the event.

II. REVIEW AND APPROVAL PROCESS

A. A Meeting/Workshop Budget Request form (See Exhibit A) should be prepared for each event by a designated meeting coordinator.

B. The meeting coordinator should prepare the budget request form for all elements. Information relating to airfares should be obtained through IVI.

C. The meeting coordinator should include a brief outline agenda for the meeting with the budget request.

D. Sufficient lead time should be built into the meeting planning calendar to assure that approval can be obtained at least 30 days prior to the event.

E. After approval, the meeting coordinator should send a copy of the Budget Request Form to others who may be involved in the planning process.

III. REIMBURSEMENT

A. Invoices for meeting costs for CIJE staff and consultants (room rental, meals, etc.) should be submitted for reimbursement to the CIJE office manager for processing. A copy of the Meeting/Workshop Budget Request form (Exhibit A) and any supporting explanation or documentation should accompany all requests for reimbursement.

B. Individual travelers should submit their own Travel Expense Statements for their personal travel expenses incurred in route to and from the event.

IV. PLANNING GUIDELINES

A. Travel

All travel arrangements should be made through our appointed travel agent. Group rates from the airlines may be available and these will be researched by the travel agent. Please provide sufficient lead time to do this.

B. Equipment

Most off-site facilities are equipped to provide the following items on a no-charge basis:

1. Chalkboard

2. Easels

3. Projection screens, tables and extension cords

NOTE: Projectors, tape recorders, etc., are not normally provided and plans should be made to obtain these items. If not readily available, the equipment and its projected cost is to be detailed on the budget request.

C. Meals

1. Meals which are not provided as part of a group should be budgeted to conform to the meal allowance schedule for individuals established in the Travel Expense Policy.

2. Groups

   a. As a general rule, group meals served in a private room will cost more. When it is necessary to meet in a private room, the cost of the meal should generally not exceed the meal allowance schedule by very much. Since these are work sessions, fancy or elaborate dishes are inappropriate and emphasis should be placed on normal fare.

   b. Group meals are to be budgeted separately and should be listed on the back of the Meeting/Workshop Budget Request form (Exhibit A).#

Entity ______________________________

Project ______________________________

Responsible Person/Meeting Coordinator ______________________________

Purpose ______________________________

Date(s) of Meeting ______________ Time of Meeting From: ______ To: ______

Meeting City/Airport ______________ Arrival Date and Latest Suitable

Arrival Time ______________ Departure Date and Earliest Suitable

Departure Time ______________ Meeting Agenda Attached? Yes ______ No ______

Location: Where? ______________ Phone ______________

Address ______________ Fax ______________

Is the location already reserved? Yes ______ No ______

* ATTENDEES (*If more space needed please attach separate sheet.)	AIRPORT DEPARTURE CITY	TRAVEL AIR [1]	TRAVEL DRIVE	ROOMS	MEALS	TOTAL
ATTENDEE COST		$	$	$	$	$ [2]

1 Meeting manager should complete all elements of this form except air fares. This form should then be sent to the Corporate Travel Department who will insert estimated air fares and return the form within 3 working days from the date received.

2 *CARRY TOTAL FORWARD TO REVERSE SIDE

* If there are other attendees who will cover their own expenses, list on a separate sheet

MEETING/WORKSHOP BUDGET ELEMENTS

ATTENDEE COST: *(Brought forward from front side)* $________

DESCRIPTION

MEETING ROOM(S): ________________________________

________________________________ $________

GROUP MEALS: (CHECK APPROPRIATE BLOCK(S) AND INDICATE THE PER PERSON COST AS WELL AS THE TOTAL)

☐ BREAKFAST $________ (PER PERSON) ☐ LUNCH $________ (PER PERSON) ☐ DINNER $________ (PER PERSON) $________

EQUIPMENT: ________________________________

________________________________ $________

GROUP REFRESHMENTS: ________________________________

________________________________ $________

OTHER (SPECIFY): ________________________________ $________

TOTAL MEETING/WORKSHOP BUDGET $________

Submitted By	Date	Financial Approval:	Date
Air Fares Estimated		Operations Approval:	
Knowledge Center Approval:		Final Approval:	

*Required for budgets allowing less than 30 days notice.

FOR INSERTION IN: CIJE OPERATIONS MANUAL

SUBJECT: TEMPORARY SECRETARIAL SUPPORT FOR FOUNDATION PROJECTS

no. 1.4
effective 7/1/93
supersedes NEW

I. PURPOSE

The purpose of this policy is to outline the procedure to be used for engaging secretarial support services required for foundation projects.

II. PROCEDURE

A. An employee or consultant for any CIJE project should determine with his/her supervisor the need for hiring secretarial support. Once this is determined, the employee or consultant should identify a service that provides competent service at a reasonable rate.

B. Once a secretarial service is identified, the consultant or employee should complete CIJE 108 (6/93) and return it to P. O. Box 94553, Cleveland, Ohio 44101 for filing.

C. As work is performed, the secretarial service should send the bill to the employee or consultant for verification and approval. The consultant or employee should mark the bill "OK" and initial and date it.

D. The consultant or employee should then send it to P. O. Box 94553, Cleveland, Ohio 44101 for payment.

E. Payment will be sent directly to the service provider.#

MAF SECRETARIAL SUPPORT

Name: ______________________________

Address: ______________________________

____

Phone: ______________________________

Social Security Number: ______________________________
(if individual)

Secretarial Support for: ______________________________

Project: ______________________________

Rate: ______________________________

Terms/Limitations (explain) ______________________________

____

____

Submitted by ______________________________ Date ______________

Knowledge Center Approval ______________________________ Date ______________

Financial Approval ______________________________ Date ______________

Operations Approval ______________________________ Date ______________

Final Approval ______________________________ Date ______________

FOR INSERTION IN: CIJE OPERATIONS MANUAL

SUBJECT: ATTENDING CONFERENCES AND SEMINARS

no. 1.5
effective 7/1/93
supersedes NEW

I. PURPOSE

The purpose of this policy is to outline the procedure for preapproval to attend a meeting or seminar.

II. PROCEDURE

A. Complete the Request to Attend a Meeting or Seminar (CIJE 109) by making a machine copy of this form. Contact the approved travel agent to determine travel costs.

B. Obtain approval from your supervisor.

C. Forward the completed form to CIJE, P. O. Box 94553, Cleveland, Ohio 44101 for processing.#

REQUEST TO ATTEND A CONFERENCE OR SEMINAR

Your Name:
ne of Meeting:

Please describe benefits of attending:

Cost:

Prepayment Required?
( ) Yes ( ) No

Sponsoring Organization:

Address:

City: State: Zip:

Dates of Scheduled Event: from: ______ to: ______

Location of Event: ______

Estimated Costs for Meeting/Seminar:

Registration Costs $ ______

Travel Costs $ ______ ( ) Air ( ) Other

Hotel (if separate) $ ______

Meals $ ______

Total Estimated Costs $ ______

Advance Registration costs to be paid with this request: $ ______

Are reservations cancellable? ( ) Yes ( ) No
Are costs recoverable? ( ) Yes ( ) No
Are there any restrictions? ( ) Yes ( ) No Explain: ______

	APPROVALS		DATE
	Print Name	Signature	
Submitted By			
Approved By			
Approved By			
Approved By			

Financial Review	Final Approver

I. OBJECTIVE

Managing our activities in an efficient and economical manner, without "frills," is a basic principle. All travelers are asked to be cost-conscious in their travel planning and to ensure that lodging, meal expense, car rental agencies, and airline carriers meet our standards. Our objective is to keep travel expenses cost effective, as well as to be practical and logical. Please know that all CIJE travelers will use this single set of standards and policies.

II. AUTHORIZED TRAVEL AGENT

The designated authorized travel resource should be used for travel and ticketing.

III. EXPENSE REIMBURSEMENT

A. Reimbursement of Expenses

The CIJE reimburses travelers for legitimate travel expenses incurred on authorized trips. In most cases, expenses are paid by the person incurring them, and then reimbursed when the Travel Expense Statement (MAF 02) is approved by your designated approver.

B. Travel Expense Statement

1. Travel Expense Statements must be completed in ink (see Exhibits A). Receipts for expenditures should be attached to the back of the Travel Expense Statement.

2. Travel Expense Statements should be submitted for approval on a weekly or no later than monthly basis, depending on your travel schedule.

3. Fill travel reports out completely. Expense reports cannot be reimbursed when incomplete.

4. Unauthorized expenses will be deducted automatically. Both the traveler and approver will be notified of the amount and reason for the deduction.

C. Travel Expense Reimbursement Standards

Periodically, we review the travel expense reimbursement standards to ensure that they are reasonable. In this review process, data on travel costs is gathered from government and private sources. This data is used to update the travel standards.

D. Temporary Travel Advances

1. Temporary travel advances are available to those who travel only occasionally, and are limited to the estimated cost of the trip.

2. Temporary travel advances may also be obtained when airline rules require that tickets must be purchased 21 days or more prior to the date of travel.

3. When submitting a Travel Expense Statement in which a temporary advance was used, complete and process the form in the normal manner. Deduct the travel advance from the amount due you.

4. Temporary travel advances may be obtained through your supervisor on request.

E. Promotional Rebates, Coupons and Frequent Flyer Awards

Occasionally, organizations will offer promotional coupons, free trips, rebates, etc. which can be applied against the cost of future airline flights, stays at hotels or motels, car rentals, restaurants, etc. Since the CIJE pays for travel expenses resulting from authorized trips, such benefits are the property of the CIJE and should be processed as follows.

1. When a cash rebate is received, the amount of the rebate should be noted on the itemized invoice and used to reduce the cost of the service. The amount shown on the Travel Expense Statement will then reflect the net cost, after the rebate.

2. Any rewards realized from frequent flyer programs are for the benefit of the CIJE, and are to be used for CIJE trips. This is true for any coupons or other rebates.

IV. AIR TRAVEL

A. All air travel will be on commercial lines. Use of private aircraft or charter airlines is not permitted. Least Cost Routing should always be used.

B. The back-to-back ticketing technique should be used to obtain discounted air fares when a traveler knows in advance that there is a need to repeat a trip between cities. Back-to-back ticketing is defined as the purchase of two tickets covering travel to the same city on two different occasions. All back-to-back tickets will be billed directly to the CIJE by our travel agent. Therefore, no reimbursement for these airline tickets is expected. See Exhibit A, No. 5 for reporting such expenditures.

C. Charges for excess baggage are not reimbursable unless the excess baggage is extra equipment required for a specific assignment.

D. Travel To and From the Airport

Travelers are expected to utilize the most logical, and practical, least-cost method of travel to and from the airport.

V. GROUND TRANSPORTATION

A. Travel by Private Car

1. When it is appropriate to use your personal car for CIJE business, a mileage/kilometer allowance (see authorized rates on Exhibit B) is authorized to cover all expenses except for:

a. Toll charges - reimbursed at actual cost.

b. Parking - reimbursed at actual cost. At airports, charges are not to exceed the maximum long-term daily rate at the airport.

B. Receipts

1. A receipt for paid ground transportation (bus, courtesy van, taxi, etc.) is required when the expenditure for any one occurrence exceeds $10.00.

2. A receipt for parking charges and toll charges over $4.00 is also required.

3. As a general rule, obtain receipts wherever practical to do so.

VI. CAR RENTAL

A. Reservations

All rental car reservations must be made through our authorized travel agent. Generally, a compact car will be rented.

B. Insurance

When renting a vehicle, you should always take the collision protection charge and other forms of insurance coverage. You should not waive any coverage.

C. Gasoline

Gasoline purchases for a rental car are to be added to the vehicle cost and entered as a single total recorded in the "Car Rental Expense" block. Travelers are asked to fill up rental cars when returning them, to avoid incurring the excessive gasoline charge made by rental companies.

VII. HOTEL ACCOMMODATIONS

A. All travel reservations for accommodations should be made as per the instructions given you. (To be developed)

B. Single minimum rate rooms will generally be used.

C. Charges are to be paid by you upon checking out. They should not be billed to the CIJE.

D. Note: We do not provide reimbursement for any "guaranteed reservations" that were not cancelled due to your error.

E. Laundry and valet expenses are reimbursable if you are away from home on CIJE business at least six consecutive days.

VIII. MEALS

A. The actual amount spent on meals is reimbursable up to the maximum limits listed in Exhibit B. Tipping is not separately reimbursable as it is covered in the meal allowance.

B. Please note that there are three levels of meal expenses. We expect you to follow the standard level when you can. We have published two additional levels, and ask you to use your judgment as to which level to follow. As a guide, we would expect the following.

1. Use the standard level, as a general rule.

2. When you are unable to conveniently take your meals in "reasonable" restaurants, you may use Level 2.

3. In certain large cities, for example, New York or Los Angeles, you may find it necessary to use Level 3.

C. Meal costs must be itemized daily on your Travel Expense Statement. All personal meals and all outside guest meals require a receipt. Tips to a maximum of 15% should be added to the receipt when they are not included.

D. Reimbursement for meals is only authorized when you are away from home overnight or in the following instances:

1. BREAKFAST - When required to eat away from home due to CIJE business (i.e., meetings, training sessions, etc.)

2. LUNCH - When you are working more than 30 miles/48 kilometers from your base office. *NOTE:* If you work out of your home, that is your "base office."

3. DINNER - When you must work past 7:00 p.m. away from your home, or when performance of job duties, due to travel, prevents you from being home by 7:00 p.m. In both instances, a meal expense must be actually incurred.

E. Meals held as a "convenience" with other CIJE personnel in your home city are not reimbursable.

F. The consumption of alcohol creates a potential hazard to the health and safety of all. Accordingly, alcoholic beverages are not appropriate and are not reimbursable.

G. If, in line with CIJE business, you dine with another CIJE employee or consultant, each should pay for his or her own meal except when entertaining guests (See Section IX).

IX. ENTERTAINING GUESTS

If, in line with CIJE business, you have a meal with other non-CIJE personnel, it may be appropriate on occasion for you to pay for the whole check.

A. As a general guideline, the price of such meals should follow our normal meal allowances. However, this may not be practical in all situations or locations. In such instances, good judgment should be exercised, and explained on your expense report. Note: The total cost of your meal plus your guest(s) should be entered in the "entertainment and other non-travel expenses" category on the Travel Expense Statement.

B. Complete the "entertainment and other non-travel expenses" category on the back side of the Travel Expense Statement and include the following:

1. Date of expenditure
2. Name of establishment
3. Business purpose
4. Name, title and organization of all attendees (including CIJE employees).
5. Amount

C. Attach a receipt showing the amount and the name of the establishment.

X. TELEPHONE COMMUNICATIONS

A. Telephone charges should be itemized on your Travel Expense Statement by identifying the person or organization called.

B. Direct dialing should be used to take advantage of the lower rate offered. An operator assisted call increases the cost of a phone call and should be avoided.

XI. NON-REIMBURSABLE ITEMS

The following expenses are not approved unless specifically authorized in advance, and individuals incurring them will do so at their own expense:

A. Office equipment or tools.

B. Any cost associated with cellular telephones, including equipment acquisition, installation, maintenance, usage and service fees.

C. Excess baggage charges, unless the excess baggage is equipment required for a specific assignment.

D. Mileage/kilometer charges on personal car for personal travel.

E. "Guaranteed" reservations that are not used and were not cancelled due to your error.

F. Tipping for meals, as this is included in the meal allowance.#

STANDARD INSTRUCTIONS FOR COMPLETING EXPENSE STATEMENT (See Exhibit A)

Note: Travel expense Statements must be completed in ink.

1. Entity/Project for CIJE related activities should always say "CIJE."

2. "Period Ending" should be completed with the concluding date of expenses covered in this statement.

3. Enter the address where the check should be mailed.

4. Specifically state the purpose for your travel. For example: "To meet w/consultants in N.Y., on (Date)." or, "To attend conference in Toronto, on (Date)."

5. Enter the amount of airline tickets obtained or provided to you by the CIJE on a prepaid basis. Attach the "original passenger receipt" copy(s) and the travel itinerary provided by our authorized travel agent to the back of the statement.

6. Note: All unused airline tickets should be attached to the front of the statement. This includes CIJE prepaid tickets as well as non-refundable tickets that were charged to the traveler.

7. Date of travel.

8. City traveled from.

9. City traveled to.

10. Amount of airline tickets which you used. Attach the passenger receipt copy(s) and the travel itinerary provided by our authorized travel agent to the back of the statement. In lieu of the original passenger coupon, attaching a clear photocopy (when possible) of the ticket with a note explaining the circumstances will be acceptable in the following situations.

    a. When the original passenger coupon must be surrendered to the travel agent or airline to obtain credit for a ticket which was only partially used.

    b. When "back-to-back" tickets have been obtained to qualify for discounted airline fares. In this case, the second copy of each of the two tickets will not be used until the second trip is taken. This requires that the "passenger receipt" of each ticket may not be torn out until all segments of each ticket have been used.

11. Total amount of personal auto expense incurred for each day as detailed on the reverse side of the statement.

12. In the event it is necessary to rent a car for CIJE business purposes, a compact car will be rented through the authorized travel agent and the amount of the rental plus fuel purchased entered here. The car rental agreement, gasoline receipt(s) and the travel itinerary, provided by our authorized travel agent must be attached to the back of the statement. See Section VI for detailed guidelines on car rental.

13. Amount of local transportation as detailed on the reverse side.

14. Motel and hotel charges are to be <u>paid for by you upon checking out</u>. See Section VII for detailed guidelines on accommodations.

15. <u>Meals</u>

    a. Current meal standards are listed on Exhibit B.

    b. See Section VIII of this policy for detailed guidelines on reimbursement of meal expenses.

16. Costs incurred for business related postage.

17. <u>Telephone</u>

    a. Telephone charges should be entered here and detailed on the reverse side.

    b. If no receipt is available, the calls should be listed on the reverse side of the Travel Expense Statement in the space provided as shown in Exhibit A, No. 17.

       If a receipt is available, indicate the name of the person and city called next to each charge on the receipt.

    c. Include original copy of any charge card billing with the name of the person called next to each charge.

18. Amount of all other reimbursable expenses should be entered here and detailed on the reverse side. <u>Note:</u> Entertainment expense should be detailed as indicated on Exhibit A.

19. Daily total of reimbursable expenses.

20. Deduct the amount of travel advances you received, if applicable, and determine the amount due to or from the CIJE.

    a. If you spent more than the advance, deduct the amount of the travel advance from the total expenses and show the balance to be reimbursed.

b. If the travel advance exceeds the expenses incurred, please submit your check with your Travel Expense Statement to repay the advance.

21. Submitter must sign here. Submit to designated approver who will approve and submit directly for reimbursement. No expense statement will be processed if the submitter's signature is missing.

22. Detail expenses incurred for the use of your personal car.

    NOTE: Beginning and ending daily mileage/kilometer readings must be entered on the reverse side of the Travel Expense Statement in the space provided. Always record your car's total beginning and ending mileage, for example, beginning 26,152 - ending 26,247.

23. Original receipts should be attached to your Travel Expense Statement. Photo copies are not acceptable.

Exhibit A

MANDEL ASSOCIATED FOUNDATIONS
TRAVEL EXPENSE STATEMENT

ENTITY/PROJECT CIJE (1) PERIOD ENDING (2) 9/15/94

NAME (PRINT) Albert Adams ADDRESS 123 Broadway (3) CITY Anytown STATE AZ ZIP 87654

PURPOSE OF TRIP (4)

MON.	
TUE.	
WED.	Meet with consultants in NY on 9/1 - 9/2/94
THUR.	Attend conference in Toronto 9/9 - 9/10/94
FRI.	
SAT. and/or SUN.	

NON-REIMBURSABLE AIR TRAVEL CHARGED TO MAF (ATTACH RECEIPTS) (SEE NOTES 1 & 2) (5) $ 697 BTB - Trip 1

									TOTALS
DATE (7)		9/1	9/2	9/9	9/10				
FROM (8)		Anytown	NY	Anytown	Toronto				
TO (9)		NY	Anytown	Toronto	Anytown				
TRAVEL — AIR TRAVEL (SEE NOTE NO. 2)	(10)			525.00					525.00
TRAVEL — AUTO EXP: OWN CAR (DETAIL ON REVERSE SIDE)	(11)		14.46		15.46				29.92
TRAVEL — CAR RENTAL EXPENSE (INCLUDE PURCHASED GAS)	(12)								
TRAVEL — OTHER TRANS. (DETAIL ON REVERSE SIDE)	(13)	20.00	18.50	2.50	2.50				43.50
TRAVEL — LODGING	(14)		135.00		112.00				247.00
TRAVEL — BREAKFAST	(15)				6.00				6.00
TRAVEL — LUNCH			7.50	6.75	8.00				22.25
TRAVEL — DINNER		22.75		17.50					40.25
POSTAGE	(16)								
COMMUNICATIONS (DETAIL ON REVERSE SIDE)	(17)	2.25	.50						2.75
ENTERTAINMENT AND OTHER NON-TRAVEL EXPENSES (DETAIL ON REVERSE SIDE)	(18)		48.50						48.50
TOTAL - (EXCLUDE NON-REIMBURSABLE ITEMS)	(19)	45.00	224.46	551.75	143.96				965.17

LESS ADVANCE (if applicable)	—
AMT. DUE MAF (attach check)	—
AMT. DUE FROM MAF (20)	965.17

NOTES:

1. Attach unused, company-paid tickets to the front of this report.
2. If this flight was not the least expensive, please explain why.
3. Attach receipts for Air Travel, Lodging, and all other appropriate receipts. Failure will delay reimbursement per Travel Policy.
4. Fill out this report completely. Expenses will not be reimbursed when a report is incomplete.

I hereby certify that all of the above listed expenses were authorized amounts incurred in connection with my official MAF duties.

(21) (SIGN) Albert Adams 9/20/94
Date

Approved By (Print) Virgil Vogel

(SIGN) Virgil Vogel 9/22/94
Supervisor Date

MAF 02 (4/94)

22

AUTO EXPENSE - OWN CAR

								TOTALS
1. DATE	9/1	9/2	9/9	9/10				
2. TRAVEL FROM	Home	Airport	Home	Airport				
3. TO:	Airport	Home	Airport	Home				
4. TO:								
5. ODOMETER START	26174		27174					
6. ODOMETER FINISH		26203		27203				
7. MILES DRIVE		29		29				58
8. MILEAGE RATE		.24		.24				.24
9. MILEAGE EXPENSE		6.96		6.96				13.92
10. PARKING		7.50		8.50				16.00
11. TOLLS		—						
12. TOTAL AUTO EXP. (10+11+12)		14.46		15.46				29.92

13

OTHER TRANSPORTATION - TAXI, LIMO, BUS, OTHER (ATTACH RECEIPTS)

DATE	SPECIFY TYPE	FROM	TO	AMOUNT
9/1	Taxi	LaGuardia	Roger Smith Hotel	20.00
9/2	Taxi	Roger Smith Hotel	La Guardia	18.50
9/9	Subway	Airport	Downtown Toronto	2.50
9/10	Subway	Downtown Toronto	Airport	2.50

17

COMMUNICATIONS (ATTACH RECEIPTS)

FROM	TO	PERSON CALLED	REASON	AMOUNT
Airport	Office	A. Smith	Check for messages	2.25
Hotel	JCCA	B. Jones	Confirm meeting	.50

18

ENTERTAINMENT AND OTHER NON-TRAVEL EXPENSES (ATTACH RECEIPTS)

DATE	PLACE	BUSINESS PURPOSE	NAME, TITLE, COMPANY OF INDIVIDUALS	AMOUNT
9/2	Dock's	Consultation	B. Adams, Director, ABC Foundation	48.50

ATTACH ALL RECEIPTS, OTHER THAN UNUSED AIRLINE TICKETS. ATTACH UNUSED AIRLINE TICKETS TO THE FRONT.

Exhibit B

TRAVEL ALLOWANCES
UNITED STATES

	STANDARD LEVEL	LEVEL 2	LEVEL 3
Breakfast	$ 5.75	$ 6.00	$ 7.50
Lunch	$ 5.75	$ 8.00	$10.00
Dinner	$14.00	$17.50	$25.00
Mileage	24 cents/mile	24 cents/mile	24 cents/mile

CANADA

TO BE DETERMINED

I. PURPOSE

The purpose of the Position Description Questionnaire (see Exhibit A-CIJE-302) is to provide a complete description of project positions. The original position description questionnaire should be maintained in the personnel file of each CIJE employee or consultant.

II. POLICY

The PDQ provides a standard format for recording job content and responsibilities. This information is then used to evaluate positions and to serve as a guide during the annual job progress review.

III. UPDATE

The PDQ will be reviewed annually. The update will be done by the incumbent with approval from his/her supervisor. The annual review will be added to the personnel calendar of events.

IV. GUIDELINES FOR COMPLETING

A. The questionnaire should present the position the way it was intended to be performed and should not be "tailored" to meet the capabilities of the current incumbent.

B. Descriptions should be brief, concise and clear and describe not only how and what is done but, where possible, why it is done. Incidental or occasional duties should be left out.#

CIJE
POSITION DESCRIPTION QUESTIONNAIRE

INCUMBENT'S NAME ______________________ DATE ____________

POSITION TITLE (Indicate if Consultant) ______________________

WORKING LOCATION (City) ______________________

REPORTS TO: NAME, TITLE ______________________

1. MAIN FUNCTION

What is the primary purpose of your position? Limit your answer to one or two sentences.

____

____

____

Guidelines for Completing Section 1.

This section should be a brief statement of the general function or purpose of the position and its primary objective. In other words, why the job exists in the organization and what wouldn't be accomplished if the position did not exist?

2. DUTIES AND RESPONSIBILITIES

What are the major tasks and activities you perform in order of importance. What is the approximate percentage of time you spend on each task.

Guidelines for Completing Section 2.

This section details the key responsibilities and activities of the position. It describes what the incumbent does to accomplish the job.

RESPONSIBILITIES	TIME (%)
A. ______________________	
______________________	________ %
B. ______________________	
______________________	________ %
C. ______________________	
______________________	________ %

SUPERVISION OF OTHERS

A. What positions (and how many incumbents in each) do you have direct supervisory responsibility for?

B. List any other positions for which you provide guidance that do not report directly to you.

4. FINANCIAL RESPONSIBILITIES

Please list any financial or budgeting responsibilities.

5. EDUCATION REQUIREMENTS

What is the specific level of formal education and type of degree required to perform this job. Describe any special requirement unique to this position.

6. WORK EXPERIENCE

List the prior positions that are necessary background to qualify for this position. Also, state the approximate length of time needed in each position.

NOTE: Number 5 and 6 should describe the educational and work qualifications of a successful candidate, not necessarily the background of the present incumbent.

CONTACTS

Please indicate the highest level of your internal and external contacts that occur regularly and the nature of the interaction.

____

____

____

8. OTHER INFORMATION

Please include any other information which you feel is important to understanding this position.

Guidelines for Completing Section 8.

This section may be used to describe the environment within which the job operates and identify the position's major challenges. It is important to direct the comments to the role of the position and not the performance of the incumbent.

____

____

____

	Signature	Date
Employee/Consultant		
Supervisor		
Approver		

SUBJECT: CONSULTING AGREEMENTS WITH INDIVIDUALS OR FIRMS

I. OBJECTIVE

To provide guidelines for developing and approving consulting agreements.

II. SCOPE

The guidelines within this policy are meant to apply to individuals or firms who provide assistance on a specific project or ongoing program.

III. POLICY

A. A consultant engagement must be authorized in a planned and controlled manner. Before engaging a consultant, there must be a Consultant Employment Form (CIJE 312) filled out and approved.

B. Consulting agreements may either be established for a specific assignment or for a fixed period of time. See Exhibit A for a checklist of factors that should be considered when defining the terms and scope of the consulting job.

C. Written proposals should be obtained from all prospective consultants clearly setting forth the items listed on Exhibit A.

D. Payments to consultants will only be made upon the rendering of an invoice for services by the consultant appropriately approved or unless otherwise specified in the Consulting Agreement. The support must clearly set forth items A through L of Exhibit A.

E. At the completion of the assignment or on a periodic basis, if appropriate, an evaluation of the quality of the work versus the project plan should be completed.

F. Any renewals of consulting agreements or changes to terms (e.g. financial arrangements) must follow all procedures above.#

CHECKLIST FOR USE WHEN ENGAGING A CONSULTANT

A. The city and country in which the work is to be performed.

B. The country of citizenship for individuals or country of domicile if other than an individual of the payee of the service.

C. The term of the consulting agreement.

D. The provisions for terminating the consulting agreement, with or without cause and with how much advance notice.

E. The consulting rates to be paid.

F. The payment schedule (biweekly, monthly, etc.).

G. The extent of any reimbursements for out-of-pocket costs. (Consultants will be expected to use the MAF travel expense guidelines.)

H. Any other fees or charges.

I. The currency in which payments are to be rendered.

J. Location for checks to be sent should be provided.

K. The tax identification number of the payee, if appropriate.

L. The tax matters affecting the contract including the need to withhold income taxes or issue Internal Revenue Service form 1099.

M. The documentation to be provided in support of billings.

N. The scope of the project must be clearly defined in the engagement plan, and there should be a project time schedule.

O. The format and frequency of progress meetings should be clearly defined.

INSTRUCTIONS FOR COMPLETING THE CONSULTANT EMPLOYMENT FORM (CIJE 312)

The purpose of the Consultant Employment Form is to capture all pertinent information relating to the consulting agreement set forth. Please complete this form in a clear and concise manner. This should be completed by the consultant's supervisor.

1. Payee refers to the consultant we are paying. Please print full name clearly.

2. Payee ID# is the U.S. Social Security number or the employer ID number.

3. Payment address can be the consultant's home address or other address where he/she would like to receive payment.

4. Please indicate entity such as CIJE and, if a specific project is involved, list the name of the project, e.g. Monitoring, Evaluation and Feedback.

5. Briefly summarize the project the consultant will be working on, even if it is not one of the "named" projects mentioned in 4. E.g., project to determine feasibility of developing a survey for all Lead Communities.

6. Please indicate the date the consultant's work should begin. Payment will begin starting at that date. Also include date you anticipate the consulting assignment will be completed.

7. Please list the supervisor or person who will oversee the consultant's activities.

8. Please indicate the amount of money to be paid to the consultant in dollars per day, month, year. Also indicate how frequently the consultant will be paid, i.e., monthly, quarterly, as billed.

9. Please indicate whether we will have to withhold taxes. Also indicate country where consultant is a citizen.

10. Terms/limitations should include any information describing the terms of the agreement e.g., consultant will be paid $500/day up to $5,000 per year or consultant fees will not exceed $7,500 for the duration of this project.

11. Payor will generally be CIJE but it may be another source of payment. Please indicate clearly who will be paying the consultant.

12. In some cases the consultant will need to bill the CIJE either monthly or as work is completed. In these cases, you should check "yes."

13. Please indicate whether this consultant has any current assignments with the CIJE or has done consulting work for the CIJE prior to this assignment. Also indicate what the assignments were and when.

14. Please use the section on comments to provide further explanation on any aspect of the arrangement or for clarification of any section above.

15. The submitter should be the person completing this form, generally the supervisor of the consultant.#

CONSULTANT EMPLOYMENT FORM

Payee 1 ______________________ Date ______________

Payee ID# 2 ______________ (If U.S. citizen) If no, indicate country of citizenship ______________

Payment Address 3 ______________________________

____

Consultant to be used by (entity, project) 4 ______________________

Brief summary of project 5 ______________________

____

Desired Starting Date 6 ______________ Desired Completion Date ______________

Person responsible for overseeing consultant's activities 7 ______________

Suggested fee arrangement: 8

$ Amount ____________ per ____________ (day, mo., yr.) Frequency of payment ______________

Tax withholding required? 9 ______ yes ______ no Country ______________

Terms/Limitations 10 ______________________

____

Payor 11 ______________________________

Is on-going bill required? 12 ______ yes ______ no How often? ______________

Any current or prior assignments with us? 13 ______________________

Comments 14 ______________________________

____

____

Submitted by 15 ______________________ Date ______________

Knowledge Center Approval ______________________ Date ______________

Financial Approval ______________________ Date ______________

Operations Approval ______________________ Date ______________

Final Approval ______________________ Date ______________

FOR INSERTION IN: CIJE OPERATIONS MANUAL

SUBJECT: APPROVALS FOR ORDERING PUBLICATIONS/BOOKS

no. 4.1
effective 3/1/93
supersedes NEW

I. PURPOSE

The purpose of this policy is to outline the procedures required to order books, publications and other documents. No publications should be ordered without prior approval.

II. PROCEDURE

A. To order any publication, complete form CIJE 401 (3/93). Make a machine copy of Exhibit A and complete it.

B. When listing the publisher be sure to include address, telephone, fax and any pertinent information to facilitate contact should questions arise.

C. The first approver will review the form to ensure that all information is complete and clear, and confirm that the request is justified.

D. The Operations Approver will then receive the form for his signature.#

FOR INSERTION IN: CIJE OPERATIONS MANUAL

SUBJECT: INSTALLATION OF SERVICES OR EQUIPMENT FOR PHILANTHROPIC PROGRAMS

no. 4.2
effective 3/22/93
supersedes NEW

I. PURPOSE

The purpose of this policy is to outline a procedure for getting approval to install equipment or services for any philanthropic program.

II. PROCEDURE

As new or existing programs are developed as part of the philanthropic program, the need to install services or equipment for efficient operation may arise. The following procedure should be followed to gain approval.

A. Complete form CIJE 402. The submitter should forward it to the office manager of the philanthropic program.

B. The office manager will review the form for completeness, make a recommendation and forward it to the financial approver.

C. The financial approver will review the form for accuracy and other financial considerations and send it to the final approver for signature.#

APPROVAL FOR INSTALLATION OF SERVICES OR EQUIPMENT

Philanthropic Programs

Philanthropic Program____________________

Service/Equipment Requested____

____

Purpose____

____

Suggested by ____

Options and Costs (Use additional sheet if necessary)

1. Describe, including costs______________________________________

____

2. Describe, including costs ______________________________________

____

3. Describe, including costs______________________________________

____

Submitters Recommendation____

____

____

Office Manager's Recommendation ___________________________________

____

____

Submitted by______________________________ Date______________

Knowledge Center Approval ________________________ Date______________

Financial Approval_________________________ Date______________

Operations Approval________________________ Date______________

Final Approval____________________________ Date______________

FOR INSERTION IN: CIJE OPERATIONS MANUAL

Subject: SCHEDULING OF MEETINGS FOR LEAD COMMUNITIES

no. 5.1
effective 7/1/93
supersedes NEW

I. PURPOSE

To facilitate the scheduling of meetings that require the participation of CIJE board members, staff or consultants.

II. POLICY

Meetings with Lead Communities that involve CIJE board members, staff or consultants should be set up through the CIJE office. For example, as Baltimore schedules an event to launch its Commission on Jewish Continuity, CIJE is asked whether certain consultants and board members could attend on particular dates. The CIJE staff person in closest contact with Baltimore should get the list of proposed dates and CIJE representatives and forward that information to Virginia Levi. VFL will check dates with CIJE representatives and pass the results on to the community.#

FOR INSERTION IN: CIJE OPERATIONS MANUAL

no. 5.2
effective 7/1/93
supersedes NEW

Subject: WRITTEN COMMUNICATION WITH LEAD COMMUNITIES

I. PURPOSE

To ensure that any document drafted by a CIJE staff member or consultant for distribution to a Lead Community or the public receives prior approval.

II. POLICY

Any document which is drafted by a CIJE staff member or consultant for distribution beyond the core group must be submitted to CIJE, Cleveland, Attention Virginia Levi. VFL will obtain approval prior to distribution. This refers to any materials which will be used in one or more of the Lead Communities, or for distribution to the general public.#

FOR INSERTION IN: CIJE OPERATIONS MANUAL

SUBJECT: CONTACT WITH LEAD COMMUNITIES

no. 5.3
effective 7/1/93
supersedes NEW

I. INTRODUCTION

In order for the work of CIJE to proceed in a coordinated fashion, specific individuals will be designated to be in direct contact with the Lead Communities for particular purposes. Any other member of the CIJE team who requires information about the work for which a designated individual is responsible should go directly to that person. If there is the need to speak to a Lead Community representative for further detail, the designated contact person will arrange for a call to take place.

II. PROCEDURE

Following is a list of contact people and their areas of expertise. Any information on these subjects should be obtained by going first to the designated contact.

A. Lead Communities Staff Person

1. Planning for the Lead Communities project.
2. Establishment and work with local commissions.
3. Matters related to educational programs in the Lead Communities.

B. Adam Gamoran

1. Monitoring, Evaluation and Feedback project.
2. All contacts with the field researchers.
3. Work related to the educators survey.

C. Barry Holtz

1. Pilot projects.
2. Research and implementation of best practices.

D. Steve Hoffman

1. Community/CIJE Relationships.
2. Funding issues.#

I. Introduction

The Council for Initiatives in Jewish Education (CIJE) is a tax exempt [501(c)(3)] organization which is supported by foundation grants and individual donations. It is our goal that CIJE become an independent national Jewish organization. Operating support comes primarily from members of the Board of Directors and a few additional friends, while support for specific projects may be provided by foundations. Operating support will be sought on a multi-year basis, but will also be accepted on an annual basis.

The purpose of this policy is to outline the steps to be followed in raising funds for operating support of CIJE.

II. Responsibility

Fundraising is the responsibility of the Fund Raising Committee of the Board of Directors, appointed by the Chair. Fund raising administration is ultimately the responsibility of the Executive Director, who will be supported in this effort by the Fund Raising Administrator.

III. Procedure

A. By November of each year the Steering Committee will adopt a budget framework for the following calendar year. The adoption of the budget framework will trigger the initiation of the fund raising campaign for the following year.

B. During January and February, the Fund Raising Administrator will work with the Executive Director to identify prospects for fund solicitation. This list will include current board members, friends of CIJE, and prospective friends.

C. The list of prospects will be presented to the Fund Raising Committee at its March meeting for rating and assignment. The Fund Raising Administrator will then provide the committee member assigned to a particular prospect a fundraising card for that prospect. (See Exhibit A.)

D. Prospects should be contacted as soon after assignment as possible. As committee members close with their assigned prospects, they will complete the cards and return them to the Fund Raising Administrator. Members of the Fund Raising Committee will have an opportunity to conduct some solicitations face-to-face at the spring Board meeting.All solicitations should be completed and cards returned no later than June 30.

E. Once a funding commitment has been made and the card returned to the Fund Raising Administrator, the Fund Raising Administrator will do the following:

1. Update all lists to note the commitment.

2. Prepare a letter from the Executive Director to the donor, thanking him/her for the pledge and enclosing an invoice (Exhibit B) for the current portion of the commitment (or the entire amount, if a single year commitment).

3. Set up a tickler file to ensure that invoices on all unpaid commitments are sent on the first of each month until the portion of the pledge due in the current calendar year is paid.

4. Keep the Executive Director informed regarding receipt of funds and overdue pledges.

5. Prepare a letter of thanks from the Chair when funds are received. #

SAMPLE PLEDGE CARD

עת לעשות Time to Act

CIJE Council for Initiatives in Jewish Education

15 East 26th Street, New York, NY 10010-1579

Name
Organization
Street Address
City, State, Zip
Phone
Fax

HISTORY

1992	1993	1994

1995 Total

$

Method of Pledge Confirmation:
- Signature
- Letter requested
- Letter received

The Sum Of: ____________________

Signed ____________________ Date: ____________________

Secured by ____________________

Comments ____________________

Please make payments to **Council for Initiatives in Jewish Education.**

SAMPLE STATEMENT

עת לעשות A Time to Act
CIJE Council for Initiatives in Jewish Education
15 East 26th Street, New York, NY 10010-1579
PHONE 212-532-2360 • FAX 212-532-2646

XXXXXXXXXXXXXX
YYYYYYYYYYYYYYY
ZZZZZZZZZZZ 65432

PAYMENT ENCLOSED
$

KINDLY RETURN THIS PORTION WITH YOUR PAYMENT IN THE ENCLOSED ENVELOPE.

Year	Description	Pledge	Credits	Balance
1995	General Support	$17,500	$7,500	$10,000

PLEASE PAY
THIS AMOUNT $ 10,000

Please make checks payable to: **Council for Initiatives in Jewish Education**
15 East 26th Street
New York, NY 10010-1579

I. PURPOSE

The purpose of this policy is to outline the steps necessary for submitting comparative financial statements (budget versus actual results) for review by the executive director and chairman.

II. PROCEDURE

A. Comparative financial statements are to be prepared by the controller as soon as possible after the end of each month. The statements should include:

1. Current month and year-to-date results by major account classification compared to budgeted amounts.

2. Variances calculated between actual and budgeted amounts in dollars and percentage.

3. The controller's comments regarding the reasons for significant variances and areas of concern.

B. Statements and comments are given to and discussed with the executive director monthly.

C. Statements and controller's and executive director's comments are given to the chairman monthly.

D. Financial statements and comments are also distributed to:
Mandel Philanthropic Program Executive Director (RAS)#