

CENTER FOR COMMUNITY ISSUES AND CULTURAL POLICY
Budget Planning 2011-12

{FY11 Carryforward: }

Description	Index	Activity	Budget	Notes
CCACP Personnel			107,769.00	
Administrative Work-study	LXICAS	CCADM	400.00	FY11-12
AEP4 Survey/Volunteer	LXICAS	CCACP2	250.00	Fall (8-10 hr/wk)
AEP4 Survey/Outreach	LXICAS	CCACP2	500.00	Fall (8-10 hr/wk); Winter (5 hr/wk); Spring (5 hr/wk)
AEP4 Media/Marketing	LXICAS	CCACP2	200.00	Fall (5-8 hr/wk); Winter (5 hr/wk); Spring (5 hr/wk)
GRF Payroll	LXICAS	-	46,918.00	6 Terms Tuition Remission
	AADCEC	-	36,042.00	9 Terms (3) full-year stipends
	OTHER	-	23,459.00	3 Terms Tuition Remission
Director			6,000.00	
Directors discretionary fund	LXICAS	CCADM1	?	
Director 1 Course Buyout	AADCEC	CCADM	6,000.00	
Administrative			1,000.00	
General Administration	LXICAS	CCADM	1,000.00	Copy/Supplies
Communications			8,750.00	
Consulting	LXICAS	CCADM2	5,000.00	Bell+Funk
Website	LXICAS	CCADM2	?	
Year in Review publication	LXICAS	CCADM2	2,500.00	1750+ (printing) & 500+ (mailing)
Constant Contact	LXICAS	CCADM2	500.00	eNewsletter
Marketing Materials	LXICAS	CCADM2	500.00	
Other	LXICAS	CCADM2	250.00	
Development			1,000.00	
Cultivation	LXICAS	CCADM3	500.00	
Donor Management	LXICAS	CCADM3	300.00	Batchbook
Other	LXICAS	CCADM3	200.00	
Technology			1,000.00	
	LXICAS	CCADM4	1,000.00	
Programs			22,200.00	
AEP4 Study	LXICAS	CCACP2	1,700.00	(2) Installments of 850.00
Visiting Scholar Series	LXICAS	CCAR1	5,000.00	
	AADDIF	CCAR1	5,000.00	
	LXICAS	CCAR1	1,000.00	Last-minute pot
Research Interst Groups	LXICAS	CCAR6	2,500.00	1,500 plus 1,000 carryforward from FY11
Student Travel Rsrch	LXICAS	CCAR2	2,000.00	
	AADDIF	CCAR2	1,500.00	
Student Rsrch Journal	AADDIF	CCAR5	2,500.00	
Culture Work	AADCEC	CCAR3	1,000.00	
Occasional Paper series	AADCEC	CCAR4	?	
			147,719.00	

CCACP/AAD Consultant Invoicing Process:

1. Receive Invoice from consultant.
2. Review invoice to make sure it is itemized consistently with consultant's personal services contract.
3. Fill out Invoice Direct Payment Form, which can be found at:

http://aaa.uoregon.edu/fiscalservices/downloads/invoice_direct_payment.pdf

Index/Activity Codes:

██████████ – Communications
█ ████████ – Development

Approval Signatures: Tina Rinaldi or Patricia Dewey

4. Submit invoice, direct payment form, and pages 1, 3, and 5 of the consultant's personal services contract to AAA Fiscal Affairs Office.

The order to staple the documents in is:

-Invoice Direct Payment Form
-Invoice
-Contract Pages

You can drop-off the paperwork in the fiscal affairs in-box located at their office on the first floor.

If you have any questions, please contact:

Della Green – Accountant
dellag@uoregon.edu
541-346-2398



- Temp Employee
- PSC (Professional Services Contract)

School of Architecture and Allied Arts
Temporary Employee/Professional Services Contract (PSC) Worksheet

1. This CONTRACT WORKSHEET is to be submitted to AAA Accounting staff one month prior to service.
 TEMP/CONTRACTOR INFORMATION (Give Home or Legal mailing address and phone for tax reporting in this section)

Today's Date June 8, 2011

Contractor is a:

Resident U.S. citizen/ Resident alien

Non-Resident U.S. Citizen

Non-Resident Alien or Foreign Entity

visa type _____

Does contractor have a U.S. Tax Payer ID/SS#? Yes No

Partnership

Corporation LLC

Non-Profit Public Entity

Full Legal Name or Business Name (used for tax reporting)

bell+funk

Home (Tax) Address One East Broadway
Eugene, OR 97401

Home (Tax) Phone # (541) 653-8969

Contractor's E-mail jen@bellandfunk.com

SERVICES TO BE PERFORMED BY CONTRACTOR (Give specific details.)

2011-12 Special Projects; See Attached Sheet.

CONTRACT SERVICES INCLUSIVE DATES Start Date: 9/19/2011 End Date: 6/8/2012

Is Contract over \$5,000 (Including reimbursements to contractor and direct vendor payments)?
 Yes No (If yes and contractor, provide Attachment A.)

Is Contractor a University Employee? Yes No

Is Contractor a Oregon University System Employee at another institution? Yes No

If so, what institution? _____ What department? _____

BREAKDOWN OF PAYMENT

Honorarium	_____	<input type="checkbox"/> Fixed	<input type="checkbox"/> Not to exceed: Hourly Rate (If not to exceed) _____ per hour
Transportation	<u>105.00</u>	<input type="checkbox"/> Reimb Guest	<input type="checkbox"/> Other vendors Trans Type: _____
Meals	_____	<input type="checkbox"/> Reimb Guest	<input type="checkbox"/> Other vendors
Lodging	_____	<input type="checkbox"/> Reimb Guest	<input type="checkbox"/> Other vendors
Other	<u>4,895.00</u>	<input type="checkbox"/> Reimb Guest	<input type="checkbox"/> Other vendors Description of other: _____
Total Contract Amount	<u>5,000.00</u>		

Department Information/Certification:

By signing the approval below, I certify that funds are available for this agreement and that authorization is being given for using the index/activity code listed below. I further certify that neither I nor anyone authorizing this agreement for the department has any actual or potential conflicts of interest related to this agreement.

Department: Arts & Administration Program
 Coordinator: Maia Howes
 Index/Activity Code: ██████████
 Dept Head/PI Approval: _____