

# USE OF NON-PROFIT FUNDS BY FEDERAL EMPLOYEES

Memorandum for USUHS Ethics Official/Office of General Counsel

Subj: Request for Approval of Acceptance of Expenses for Educational, Scientific and related activities from HJF SPF/R&E or other Non-Profit Organization

1. The following information is provided in support of this request.

a. Name: \_\_\_\_\_ Phone: \_\_\_\_\_

b. Dept. and Position: \_\_\_\_\_

c. Dates and Place of Event: \_\_\_\_\_  
\_\_\_\_\_

d. Nature of the Proposed Expenditure (Meetings with an agenda not open to the public, professional courses, seminars, etc., + explain the benefit to the department)  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

e. Identify the specific HJF fund (by account number and fund) or other non-profit entity providing the funds:  
\_\_\_\_\_

**Type of Funding provided by non-profit and \$ Value (Complete appropriate blocks):**

<u>Type</u>	<u>Reimbursement</u>	<u>Value of In-kind benefit provided</u>
Meals:	_____	_____
Registration:	_____	_____
Other:	_____	_____
Total	_____	_____

2. I understand that all payments should be made directly to the vendor involved (e.g. MWR, William III, etc.), except those approved to individuals in amounts under \$50.

**3. To the best of my knowledge, expenditures of these funds would not cause a reasonable person with knowledge of all of the facts to question the propriety of this expenditure.**

**4. I have attached a copy of the meeting agenda or other documents relating to this request.**

Yes \_\_\_\_\_ Number of pages attached \_\_\_\_\_ List of attendees provided: Yes/No

\_\_\_\_\_  
Name and Signature of Requestor

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name and Signature of HJF Fund Coordinator /Dept Chair or Dean

\_\_\_\_\_  
Date

**APPROVAL**

Under the authority of 5 CFR 2635.204(L)(1) as delegated by the University President, I specifically find that:

(i) The contribution, award, or payment is not a reward for services to the organization prior to the training or meeting; and

(ii) Acceptance of the contribution, award, or payment:

(A) Would not reflect unfavorably on the employee's ability to carry out official duties in a fair and objective manner;

(B) Would not compromise the honesty and integrity of Government programs or of Government employees and their official actions or decisions;

(C) Would be compatible with the Ethics in Government Act of 1978, as amended; and

(D) Would otherwise be proper and ethical for the employee concerned given the circumstances of the particular case.

OR, other basis of acceptance \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
Signature of Ethics Official

\_\_\_\_\_  
Date