

	SUBMIT TO:	OPS	CHANCE	SHARON	SHERRY	KAYLEE	ROSS	MEGAN	KARY	CORRY	FRONT DESK	STEVE	GM	MGRS
Email/Report(s)				Payroll Associate	VP of Accounting	Accounting	Staff Accountant	Staff Accountant	HR Manager	Marketing Coordinator	Admin. Assistant	Attorney		
Name: Guest Incident Report	Goes To:	YES	YES						YES					YES
Due: Within 5 hours of Occurrence	Subject line:	Theater Name, Incident Report, Date, Name or Person making the claim (Use this format for the date: 1.1.15) (Never use "-" as separators)												
Frequency: Occurrence	Delivery:	Emailed from theater's email address												
	Notes:	EMAIL TO: InsClaims@mcgriffinsurance.com and Copy all other recipients on that email. If individual refuses to give name then in place of "Name" type "Name Unknown"												
Name: Workers Comp Report	Goes To:	YES	YES						YES					YES
Due: Within 5 hours of Occurrence	Subject line:	Theater Name, Workers Comp Report, Date (Use this format for the date: 1.1.15) (Never use "-" as separators)												
Frequency: Occurrence	Delivery:	Emailed from theater's email address												
	Notes:	Refer to Manager's binder for procedure and notify all parties listed.												
Name: Nightly Email	Goes To:	YES	YES				YES	YES		YES	YES		YES	YES
Due: 6AM EST the Next Day	Subject line:	Theater Name, Nightly Email, Date (Use this format for the date: 1.1.15) (Never use "-" as separators)												
Frequency: Nightly	Delivery:	Emailed from theater's email address												
	Notes:	Consult the Nightly Email SOP for requirements and Follow all Notes/Instructions on the Nightly Excel sheet. Always explain anything that happened during the day on the excel sheet and in the body of the email.												
Name: Weekly Social Media	Goes To:	YES	YES							YES			YES	YES
Due: Monday by 5pm EST	Subject line:	Theater Name, Social Media Review, Date (Use this format for the date: 1.1.15) (Never use "-" as separators)												
Frequency: Weekly on Monday	Delivery:	Emailed from theater's email address												
	Notes:	Use the Excel sheet for the Report. Create a Word document to copy and paste all new comments for corp review. In the body of the email paste any negative comments from the reviews and provide a response and corrective action for those negative comments. Must be submitted Monday by 5pm EST.												
Name: Film Schedule	Goes To:	YES												
Due: 11AM EST Tuesday (unless noted)	Subject line:	Theater Name, Film Schedule, Date (first day of new schedule. Use this format for the date: 1.1.15) (Never use "-" as separators)												
Frequency: When New Bookings are received	Delivery:	Emailed from GM's email address												
	Notes:	GM should submit to OPS by 11AM EST on the Tuesday (unless otherwise noted). Follow the rules and guidelines from the FILM SCHEDULE SOP.												
Name: Manager's Schedule	Goes To:	YES							YES					YES
Due: COB Tuesday	Subject line:	Theater Name, Managers Schedule, Date (Use this format for the date: 1.1.15) (Never use "-" as separators)												
Frequency: Weekly on Tuesday	Delivery:	Emailed from GM's email address												
	Notes:	Manager's schedule will run from Friday to Thursday. No response from corp does not imply approval of submitted schedule. Any variations or deviations from required schedule must receive prior written approval. GM is responsible for this schedule. PDF version must be submitted COB Tuesday.												
Name: Weekly Invoices	Goes To:	YES			YES	YES	YES						YES	
Due: 6AM EST Friday	Subject line:	Theater Name, Invoices, Date (Use this format for the date: 1.1.15) (Never use "-" as separators)												
Frequency: Weekly on Thursday	Delivery:	Emailed from theater's email address												
	Notes:	Approve and scan all outstanding invoices. Any F&B/Conc invoices should have the corresponding Receipts by PO Report following the invoice on the scan. Keep a complete copy on site. Send Originals with Weekly Packet on Fridays. Make sure this is completed after 5PM and after mail has been checked. Invoices should be scanned in the same order as they appear on the form. All CREDITS should be listed as a negative entry (- \$0.00)												
Name: Weekly Conc Period Report	Goes To:	YES					YES	YES		YES	YES		YES	
Due: 6AM EST Friday	Subject line:	Theater Name, Conc Period Report, Date (Use this format for the date: 1.1.15) (Never use "-" as separators)												
Frequency: Weekly on Thursday	Delivery:	Emailed from theater's email address												
	Notes:	Provide Copies of ALL Concessions/F&B Invoices, Packing Slips, Credits, including copies of their corresponding Receipt by PO, along with Sellable Stock Take Report, Non-Sellable Stock Take Report, Weekly Stock Audit, Period Concession Sales by Product and Handwritten Count Sheets. Provide copy in Weekly Packet. This email should have minimum 6 attachments. (4) Jacro Reports & (2) scan of all supporting documents.												
Name: Weekly Petty Cash	Goes To:	YES			YES	YES	YES						YES	
Due: 6AM EST Friday	Subject line:	Theater Name, Petty Cash, Date, \$0.00 (amount requesting) (Use this format for the date: 1.1.15) (Never use "-" as separators)												
Frequency: Weekly on Thursday	Delivery:	Emailed from theater's email address												
	Notes:	Email version all receipts should be scanned and delivered in "portrait" mode. Complete printed copy kept on site. Originals shipped with Invoices to Corporate with Weekly Packet on Friday. If you have receipts totaling less than \$50.00 submit a blank report and in the subject line the amount requesting would be \$0.00.												

Email/Report(s)	SUBMIT TO:													
	OPS	CHANCE	SHARON	SHERRY	KAYLEE	ROSS	MEGAN	KARY	CORRY	FRONT DESK	STEVE	GM	MGRS	
			Payroll Associate	VP of Accounting	Accounting	Staff Accountant	Staff Accountant	HR Manager	Marketing Coordinator	Admin. Assistant	Attorney			
Name: Bi-Weekly Payroll Verification	Goes To:	YES	YES					YES		YES				
Due: 12PM EST Noon Friday on Payroll weeks	Subject line:	Theater Name, Payroll Verification Report, Date (Use this format for the date: 1.1.15) (Never use "-" as separators)												
Frequency: Bi-Weekly	Delivery:	Emailed from GM's email address												
	Notes:	GMs will print out the POS bi-weekly Time Clock User Report sorted by First Name Format for the current closed payroll period and review/verify each employee's recorded time worked for the previous two weeks for accuracy. A note of explanation with initials should be made beside any non-manager's time who exceeded 60 hours for the 2 weeks and/or has worked 8 hours or more in a shift (e.g.; employee worked a double shift to cover for a call-in, etc.). The payroll should then be scanned and sent to corporate the next day by 12PM EST (Friday). You may add a typed sheet with your explanations but it must be scanned with the Time Clock User Report. Correct any errors before submitting and all errors found must be documented and submitted with the Time Clock User Report.												
Name: Maintenance Hours Log	Goes To:	YES												
Due: 6AM EST Friday after Payroll Period Ends	Subject line:	Theater Name, Maint Log, Date (Use this format for the date: 1.1.15) (Never use "-" as separators)												
Frequency: Bi-Weekly	Delivery:	Emailed from GM's email address												
	Notes:	If there are hours to report, use supporting excel spreadsheet Maintenance Log, include supporting pictures if needed. If you don't have any hours to report an email should be sent in with no attachment stating in the body "No hours to report this week"												
Name: Monthly Contact List Update	Goes To:	YES	YES					YES		YES				
Due: The 1st of every month	Subject line:	Theater Name, Monthly Contact List Update, Date (Use this format for the date: 1.1.15) (Never use "-" as separators)												
Frequency: Monthly	Delivery:	Emailed from GM's email address												
	Notes:	Responsibility of the GM. 1st of every month submit an email with any updates needed for the Corp contact list. If no changes then submit an email stating no changes this month. Due by 12PM Noon on the 1st of every month. May be sent in one day early if GM normal day off is the 1st. May be sent in two days early if the 1st is a GM normal Monday off.												
Name: End Of Month Workbook	Goes To:	YES												
Due: Last Thursday of the month	Subject line:	Theater Name, EoM Workbook, Date (Use this format for the date: 1.1.15) (Never use "-" as separators)												
Frequency: Monthly	Delivery:	Emailed from GM's email address												
	Notes:	Items listed as deficient on the report should be corrected by the completion of the next report.												
Name: End of Month Inventory	Goes To:	YES		YES		YES	YES						YES	
Due: 6AM EST the 1st of the Month	Subject line:	Theater Name, EoM Conc. Inv, Date (Use this format for the date: 1.1.15) (Never use "-" as separators)												
Frequency: Monthly	Delivery:	Emailed from theater's email address												
	Notes:	Submitted last day of each month. Also, send in your accurate handwritten count sheets as AP needs these for their records.												
Name: Termination Request Paperwork	Goes To:	YES	YES					YES						
Due: Before payroll period ends	Subject line:	Theater Name, Termination for "Employee Name"(Last, First), Date (Use this format for the date: 1.1.15) (Never use "-" as separators)												
Frequency: As needed	Delivery:	Emailed from GM's email address												
	Notes:	Follow the SOP for Termination that should be in your Manager's Binder												
Name: New Hire/Re-Hire Notification	Goes To:	YES	YES					YES						
Due: Before payroll period ends	Subject line:	Theater Name, New Hire/Re-Hire Notification, Date, Employee Name (Use this format for the date: 1.1.15) (Never use "-" as separators)												
Frequency: As needed	Delivery:	Emailed from GM's email address												
	Notes:	Hiring documents should not be submitted to the Corporate office unless requested. It is the responsibility of the employee and the location management to get all documents into the PAYCOR system. Once Corp signs off on the paperwork an employee ID will be generated and sent back to the theatre notifying you that you are able to schedule that employee. Re-Hires - please contact HR to see what is needed to re-activate the employee. For anyone that will be earning a wage that is higher than the minimum wage an Employee Status Change Form must be submitted or employee will default to minimum wage and will be paid at that rate until form is submitted. Once approved the rate will go into effect the upcoming Friday.												
Name: Corp CC Refund Requests	Goes To:	YES			YES	YES	YES							
Due: Once completed	Subject line:	Theatre Name, Refund, CC Double Charge, Date (1.1.11), Amount (\$) (Use this format for the date: 1.1.15) (Never use "-" as separators)												
Frequency: As needed	Delivery:	Emailed from Theatre or GM email address												
	Notes:	Follow the SOP for CC Double Charges that should be in your Manager's Binder												
Name: Travel & Expense Report (T&E)	Goes To:	YES												
Due: Once completed	Subject line:	Theater Name, T&E, Date (Use this format for the date: 1.1.15) (Never use "-" as separators)												
Frequency: As needed	Delivery:	Emailed from GM email address												
	Notes:													

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Name: Maintenance Issues	Goes To:	YES											YES	YES	
Due: Once completed	Subject line:	Theater Name, Maintenance Issue, Date (Use this format for the date: 1.1.15) (Never use "-" as separators)													
Frequency: As needed	Delivery:	Emailed from theater's email address													
	Notes:	Any major maintenance issues including but not limited to plumbing, seat repairs, electrical issues which manager on duty is unable to repair will need emailed to operations and gm. Include any detail such as model numbers and pictures. This does not include HVAC.													
Name: HVAC Issues	Goes To:	YES											YES	YES	
Due: Once completed	Subject line:	Theater Name, HVAC (plus location ex. HVAC Theater 3, HVAC Lobby), Date (Use this format for the date: 1.1.15) (Never use "-" as separators)													
Frequency: As needed	Delivery:	Emailed from theater's email address													
	Notes:	Any issues involving HVAC will need emailed to operations immediately. For emergencies (example no heat or AC)- if you do not hear back within 1 hour, call your GM or Area Supervisor for further instructions. When sending email include what the issue is, where the location of the HVAC unit is (such as theater 3) and your recommendation if you need to shut that theater down.													
Name: Booth Issues	Goes To:	YES											YES	YES	
Due: Once completed	Subject line:	Theater Name, Booth Issue (plus location ex. Booth Issue Xtreme House 1), Date (Use this format for the date: 1.1.15) (Never use "-" as separators)													
Frequency: As needed	Delivery:	Emailed from theater's email address													
	Notes:	Any issues involving projectors not working you will need to contact your booth tech via email (copy OPS) and calling them at all of their contact numbers. If you do not receive a response within 1 hour, call your GM or Area Supervisor for further instructions. When sending email include what the issue is, any messages on the projector, where the location of the projection unit is (such as theater 3) and your recommendation if you need to shut that theater down.													
Name: Guest Issues	Goes To:	YES								YES		YES			
Due: Once complete	Subject line:	Theater Name, Guest Issue, Date (Use this format for the date: 1.1.15) (Never use "-" as separators)													
Frequency: Occurrence	Delivery:	Emailed from theater's email address													
	Notes:	If you encounter a guest who is not satisfied with how something is handled, or you needed to remove a guest from an auditorium you need to send an email to OPS and GM detailing what happened. Include date, time and location of video. While this does not excuse the issue, it will certainly help prepare for comments the guest might make.													
Name: Received Legal Documents	Goes To:	YES	YES							YES	YES		YES		
Due: Upon arrival	Subject line:	Theater Name, Received Legal Documents, Date (Use this format for the date: 1.1.15) (Never use "-" as separators)													
Frequency: As needed	Delivery:	Emailed from theater's email address													
	Notes:	Any legal documents received at the theatre must be scanned and emailed to Steve Wilson and copied to Chance, HR, OPS, and the GM. This must be done immediately upon receipt of any legal documentation, no exceptions.													
Name: Power Outage and PRJ Interruptions	Goes To:	YES											YES	YES	
Due: Once completed	Subject line:	Theater Name, Power Outage, Date (Use this format for the date: 1.1.15) (Never use "-" as separators)													
Frequency: As needed	Delivery:	Emailed from theater's email address													
	Notes:	Follow the SOP for Power Outage and Projection Interruptions that should be in your Manager's Binder													
Name: Tax Exemption	Goes To:	YES						YES	YES	YES					
Due: Prior to approval	Subject line:	Theater Name, Tax Exemption, Date (Use this format for the date: 1.1.15) (Never use "-" as separators)													
Frequency: As needed	Delivery:	Emailed from theater's email address													
	Notes:	Follow the SOP for Tax Exemption Procedures and Instruction that should be in your Manager's Binder													
Name: Unopened Case Count Verification	Goes To:	YES									YES		YES		
Due: Once completed	Subject line:	Theatre Name, Unopened Case Count Verification, Date (Use this format for the date: 1.1.15) (Never use "-" as separators)													
Frequency: As needed	Delivery:	Emailed from theater's email address													
	Notes:	Follow the SOP for Unopened Case Count Verification that should be in your Manager's Binder													
Name: Receiving Concession Stock Issues/Credit Requests	Goes To:	YES						YES	YES	YES		YES			
Due: Immediately	Subject line:	Theater Name, Stock Issue, Vendor Name (i.e., VISTAR, SYSCO,NUCO, etc), Date (Use this format for the date: 1.1.15) (Never use "-" as separators)													
Frequency: As needed	Delivery:	Emailed from theater's email address													
	Notes:	Anytime you have Concession Stock Receiving issues please send this email immediately stating the issue(s) to the appropriate Vendor's representative(s) and include/copy the distribution list also. Follow the SOP's previously provided for specific Vendors. If no SOP was previously provided please follow this protocol.													