WSGC Travel Expense Form - Reimbursement Instructions

Team budgets must be submitted to WSGC as outlined in the award agreement letter in order for reimbursements to be issued. All costs associated with this program must be necessary and reasonable for this award, following all applicable WSGC regulations.

1. Make purchases(s). Please note: Reimbursements are funded under a federal grant; therefore WSGC and FNL awardees must comply with the Carthage College Travel Policy.
   1.1. Teams should select one team member to oversee the budget, ensuring collective purchases/expenses do not exceed award amount.

2. Save all original digital and hard copy receipts.
   2.1. We recommend saving receipts in a folder until time of reimbursement submission.
   2.2. Circle date and total on receipt(s).
   2.3. If food or lodging receipts cover more than one person, list participant’s name on receipt(s).
   2.4. Itemized restaurant receipts are required. If purchases are made on a credit card, a signature copy must be included. There is a $45 per diem per person for food.
   2.5. Alcohol and tips over 20% will not be reimbursed.
   2.6. All purchase receipts must be itemized, detailing each item purchased.

3. Complete a Travel Expense Form (see Tools and Tips on the WSGC website). Use a separate Travel Expense Form for each event. If your expenses exceed the allotted space on form(s), print off a second form to add the remaining expenses. Do not list both supply and travel expenses on one form.
   3.1. Carefully read and follow instructions before completing forms.
   3.2. Print out a Google map for verification of personal vehicle mileage ($ .625 per mi). Circle the total miles. The mileage rate includes fuel costs. Gas receipts will only be reimbursed for rental vehicle travel.
   3.3. Organize your receipts to align with the Travel Expense Form (by receipt category and day of the week). Label each receipt with the coinciding row and column information (i.e. Receipt 1-Fri, 3-Mon, 11-Mon, etc).
   3.4. Provide the total expended amount from each receipt in the coinciding box on the expense form.
   3.5. IMPORTANT: You must manually add all mileage together for your “Mileage Line Total”. If the decimal number is below .5, it should be rounded down. And if the decimal is above .5, it is rounded up (i.e. 52.1 miles would become 52 miles).
   3.6. For all other categories, the “Line Total” box will automatically sum receipts together – your total reimbursement being requested will automatically add up in the “Total” box.
   3.7. Initial and date each receipt with date of reimbursement submission.
   3.8. Sign, date, and enter your phone number.
   3.9. Have your team lead and advisor complete their required signatures.

4. Submit the completed form(s) and receipts in one email by the due date(s) to:
   Megan Goller
   mgoller@carthage.edu
   (262) 551-6237

Do Not:
1. Submit partially completed forms.
2. Submit forms without all required signatures.
3. Submit forms past due date(s).
4. Submit “flat” per diem rate requests.

**An example of a filled-out Project Expense form and accompanying receipts can be found on the following pages.
TRAVEL EXPENSE FORM

To receive reimbursement, this form must be submitted by each team member who made a purchase.

NOTE: The team leader cannot be reimbursed for purchases made by team members and then distribute the money.

Email Form and Receipts To: Megan Goller
mgoller@carthage.edu
(262) 551-6237

Please Make Check Payable To: Jane Doe
Name:
Address line 1: 1234 Instruction Way
Address line 2: Apt 401
City, State, Zip: Kenosha, WI 53140

Travel Start Date: 03/16/22
Travel End Date: 03/20/22
Team Institution: Test College

Travel Purpose: Instruction Workshop

<table>
<thead>
<tr>
<th>Receipt Category</th>
<th>Description</th>
<th>Sun</th>
<th>Mon</th>
<th>Tues</th>
<th>Wed</th>
<th>Thurs</th>
<th>Fri</th>
<th>Sat</th>
<th>Line Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Mileage Total</td>
<td>57.6</td>
<td></td>
<td></td>
<td>57.6</td>
<td></td>
<td></td>
<td></td>
<td>115.0</td>
</tr>
<tr>
<td></td>
<td>miles x 0.625</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>$ 71.88</td>
</tr>
<tr>
<td>2</td>
<td>Air/Rail Fare</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>$ 0.00</td>
</tr>
<tr>
<td>3</td>
<td>Baggage Fee(s)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>$ 0.00</td>
</tr>
<tr>
<td>4</td>
<td>Rental Car</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>$ 0.00</td>
</tr>
<tr>
<td>5</td>
<td>Uber/Lyft/Taxi/Metro</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>$ 0.00</td>
</tr>
<tr>
<td>6</td>
<td>Parking/Tolls</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>$ 36.05</td>
</tr>
<tr>
<td>7</td>
<td>Misc. Ground Transport</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>$ 0.00</td>
</tr>
<tr>
<td>8</td>
<td>Lodging</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>$ 1,123.54</td>
</tr>
<tr>
<td></td>
<td>Meals ($45 per diem)</td>
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<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>$ 1,123.54</td>
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<tr>
<td></td>
<td>-Breakfast</td>
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<td></td>
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<td></td>
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<td>$ 6.75</td>
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<tr>
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<td>-Lunch</td>
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<td></td>
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<td></td>
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<td>$ 0.00</td>
</tr>
<tr>
<td></td>
<td>-Dinner</td>
<td></td>
<td></td>
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<td></td>
<td></td>
<td></td>
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<td>$ 50.30</td>
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<tr>
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<td>-Other</td>
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<td>$ 0.00</td>
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<tr>
<td></td>
<td>Tips</td>
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<td>$ 0.00</td>
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<tr>
<td></td>
<td>Miscellaneous 1</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>$ 0.00</td>
</tr>
<tr>
<td></td>
<td>Miscellaneous 2</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>$ 0.00</td>
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</table>

TOTAL: $ 1,288.52

REQUISITIONER STATEMENT: I declare (under penalties of perjury) that this account of expenses is accurate and conforms to all applicable WSGC regulations. The expenses are actual, reasonable and were personally incurred in accordance to my award letter criteria.

Jane Doe
Team Member Signature
(123) 456-7890

Susan Smith
Team Leader Signature
(234) 567-8901

John Doe
Team Advisor Signature
(345) 678-9012

Date
03/20/22
03/20/22
03/20/22

Carthage College • 2001 Alford Park Drive • Kenosha, Wisconsin 53140-1094
262-551-6054 • spacegrant@carthage.edu • spacegrant.carthage.edu

Revised 08/2022
Google Maps
2001 Alford Park Dr, Kenosha, WI 53140 to
International Parking (Lot D)

Drive 57.6 miles, 59 min

We don't have the most recent timetables for this area.

via I-94 E
57 min without traffic
⚠️ This route has tolls.

$57.6 \times 2 = 115.2$
Rounded = $115 \times 0.625 = \$71.88$

1:58 PM–5:41 PM
3 h 43 min

1:58 PM–5:41 PM
3 h 43 min

Receipt 1- Wed and Sun

3/20/22
Gaylord Opryland
Nashville, TN
DATE: 03/18/22
TIME: 08:03 PM
Receipt No.: 189/1750/89
Ticket: 426755
Entry: 03/18/22 08:29 AM
LPR: VF3YTG
Net: 33.01
Tax 9.250%: 3.04
Fee: 36.05
Credit: 36.05
Trans ID: 700948952
Card No.: xxxxxxxxxxx8592
Card Type: VISA
THANK YOU

Receipt 6- Fri

3/20/22
# Receipt 8 - Wed, Thur, Fri, Sat

**Hyatt Place Nashville Opryland**
220 Rudy's Circle
Nashville, TN 37214
Tel: 615-872-0422
Fax: 615-872-9283
nashvilleopryland.place.hyatt.com

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## INVOICE

2001 Alford Park Dr  
Wisconsin Space Grant Consorti  
Kenosha WI 531401929  
United States

Confirmation No. 3445305101  
Group Name

### Room Details
- **Room No.**: 0423
- **Arrival**: 03-16-22
- **Departure**: 03-20-22
- **Folio Window**: 1
- **Folio No.**: 151068

### Dates & Charges

<table>
<thead>
<tr>
<th>Date</th>
<th>Description</th>
<th>Charges</th>
<th>Credits</th>
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<tr>
<td>03-16-22</td>
<td>Guest Room</td>
<td>236.55</td>
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</tr>
<tr>
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<td>State Tax</td>
<td>21.88</td>
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<tr>
<td>03-16-22</td>
<td>Occupancy Tax</td>
<td>14.19</td>
<td></td>
</tr>
<tr>
<td>03-16-22</td>
<td>City Arena Fee</td>
<td>2.50</td>
<td></td>
</tr>
<tr>
<td>03-17-22</td>
<td>Guest Room</td>
<td>236.55</td>
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<tr>
<td>03-17-22</td>
<td>State Tax</td>
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<td>Occupancy Tax</td>
<td>14.19</td>
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</tr>
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<tr>
<td>03-18-22</td>
<td>Guest Room</td>
<td>246.55</td>
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<td>03-18-22</td>
<td>State Tax</td>
<td>22.81</td>
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<td>03-18-22</td>
<td>Occupancy Tax</td>
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<td>City Arena Fee</td>
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</tr>
<tr>
<td>03-19-22</td>
<td>Guest Room</td>
<td>246.55</td>
<td></td>
</tr>
<tr>
<td>03-19-22</td>
<td>State Tax</td>
<td>22.81</td>
<td></td>
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<tr>
<td>03-19-22</td>
<td>Occupancy Tax</td>
<td>14.79</td>
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</tr>
<tr>
<td>03-19-22</td>
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<tr>
<td>03-20-22</td>
<td>Visa</td>
<td>XXXXXXXXXX6927 XX/XX</td>
<td>1,123.54</td>
</tr>
<tr>
<td>03-28-22</td>
<td>State Tax Exempt</td>
<td></td>
<td>-45.62</td>
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<tr>
<td>03-28-22</td>
<td>State Tax Exempt</td>
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<td>-43.76</td>
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<td>03-28-22</td>
<td>Occupancy Tax Exempt</td>
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<td>-29.58</td>
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<tr>
<td>03-28-22</td>
<td>Occupancy Tax Exempt</td>
<td></td>
<td>-28.38</td>
</tr>
</tbody>
</table>

**Total**  
976.20

---

**Guest Signature**

I agree that my liability for this bill is not waived and I agree to be held personally liable in the event that the indicated person, company or association fails to pay for any part or the full amount of these charges.

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**World of Hyatt Summary**

| Membership: | XXXXXXX863D |
| Bonus Codes: | 4 |

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**WE HOPE YOU ENJOYED YOUR STAY WITH US!**

Thank you for choosing Hyatt Place Nashville/Opryland. Our goal is to provide every guest with an exceptional stay and we are interested in any comments regarding your visit.

Please remit payment to:  
Hyatt Place Nashville/Opryland  
220 Rudy's Circle  
Nashville, TN 37214
Host: Kimberly  
Order Type: DINE IN  

<table>
<thead>
<tr>
<th>Item</th>
<th>Price</th>
</tr>
</thead>
<tbody>
<tr>
<td>BK COMBO</td>
<td>5.59</td>
</tr>
<tr>
<td>Sausage, eggs, cheddar, American cheese</td>
<td></td>
</tr>
<tr>
<td>NO Breakfast Cheese Sauce</td>
<td></td>
</tr>
<tr>
<td>Sm Seasoned Potatoes</td>
<td>0.70</td>
</tr>
<tr>
<td>Orange Juice</td>
<td></td>
</tr>
</tbody>
</table>

Total Items: 3  
Tax: 0.40  
DINE IN Total: $6.75

Receipt 9- Sun  
3/20/22
Dinner for group: Jane Doe, John Doe, Jim Doe

Receipt 11- Wed

Caney Fork
Where Friends and Family Eat!
Mon-Thu 4pm-10pm
Fri-Sat 11am-11pm
Sun. 4pm - 9pm

Server: Theressa
03/16/2022
09:39 PM
Table 16/1

SALE

VISA 4194337
Card #XXXXXXXXX8592
Magnetic card present: 
Card Entry Method: S

Amount: $41.90
8%
= Total: $50.30

Balance Due 41.90

Caney Fork
Where Friends and Family Eat!
MON-THU: 4PM-10PM
FRI-SAT: 11AM-11PM
SUN: 4PM - 9PM

Customer Copy