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 ($0.655 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:

   WSGC Accounts
   wsgc.accounts@carthage.edu
   (262) 551-6054

   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:  
WSGC Accounts  

wsgc.accounts@carthage.edu  
(262) 551-6054  

Please Make Check Payable To:  
Name:  
Jane Doe  

Address line 1:  
1234 Instruction Way  
Address line 2:  
Apt 401  
City, State, Zip:  
Kenosha, WI 53140  

Travel Start Date:  Travel End Date:  
03/16/22 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>57.6</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>115.0</td>
</tr>
<tr>
<td></td>
<td>miles x 0.655</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>$ 75.33</td>
</tr>
<tr>
<td>2</td>
<td>Air/Rail Fare</td>
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<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>$ 0.00</td>
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<tr>
<td>3</td>
<td>Baggage Fee(s)</td>
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<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>$ 0.00</td>
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<tr>
<td>4</td>
<td>Rental Car</td>
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<td></td>
<td></td>
<td></td>
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<td>$ 0.00</td>
</tr>
<tr>
<td>5</td>
<td>Uber/Lyft/Taxi/Metro</td>
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<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>$ 0.00</td>
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<tr>
<td>6</td>
<td>Parking/Tolls</td>
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<td></td>
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<td></td>
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<td></td>
<td>$ 36.05</td>
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<td>7</td>
<td>Misc. Ground Transport</td>
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<td></td>
<td>$ 36.05</td>
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<tr>
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<td>Lodging</td>
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<td></td>
<td></td>
<td>$ 1,123.54</td>
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<td>Meals ($45 per diem)</td>
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<td>9</td>
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<td>$ 6.75</td>
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<td>10</td>
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<tr>
<td>11</td>
<td>-Dinner</td>
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<tr>
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<td>-Other</td>
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<td></td>
<td></td>
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<td>$ 0.00</td>
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<tr>
<td>13</td>
<td>Tips</td>
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<td>Miscellaneous 1</td>
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<td></td>
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<td></td>
<td></td>
<td>$ 0.00</td>
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</tbody>
</table>

TOTAL: $ 1,291.97  

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  
03/20/22  

Susan Smith  
Team Leader Signature  
(234) 567-8901  
03/20/22  

John Doe  
Team Advisor Signature  
(345) 678-9012  
03/20/22  

Carthage College  
2001 Alford Park Drive  
Kenosha, Wisconsin 53140-1994  
262-551-6054  
spacegrant@carthage.edu  
spacegrant.carthage.edu  

Revised 09/2023
We don't have the most recent timetables for this area.

via I-94 E
57 min without traffic
\[ 57.6 \times 2 = 115.2 \]
Rounded= 115 \times \$0.655 = \$75.33

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
* Original *
Ticket: 426755
Entry: 03/18/22 08:29 AM
LPR: VF3Y1G

Net: 33.01
Tax 9.250% 3.04
Fee: 36.05

Credit: 36.05
Trans ID: 700948952
Card No.: xxxxxxxxxxxxx8592
Card Type: VISA

THANK YOU

Receipt 6- Fri

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

### INVOICE

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

Confirmation No. 3445305101  
Group Name  

<table>
<thead>
<tr>
<th>Date</th>
<th>Description</th>
<th>Charges</th>
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<td>City Arena Fee</td>
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<tr>
<td>03-17-22</td>
<td>Guest Room</td>
<td>236.55</td>
<td>275.12</td>
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<tr>
<td>03-18-22</td>
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<tr>
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<td>Guest Room</td>
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<td>286.65</td>
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<td>State Tax</td>
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<td>Occupancy Tax</td>
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<td>03-20-22</td>
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<tr>
<td>03-28-22</td>
<td>Occupancy Tax Exempt</td>
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**Total**: 976.20  
**Balance**: 0.00

---

**World of Hyatt Summary**

Membership: XXXXXXX863D  
Bonus Codes:  
Qualifying Nights: 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

---

**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.
Server: Theresa
DOB: 03/16/2022
09:39 PM
Table 16/1

SALE

VISA
Card # XXXXXXXXXXXX8592
Magnetic card present: S
Card Entry Method: S
Approval: 016718

Amount: $41.90
+ Tip: 8%
= Total: $49.30

I agree to pay the above total amount according to the card issuer agreement.

X Jane Doe

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

Dinner for Group: John Doe
Jane Doe
Jim Doe

3/20/12
Receipt 11- Wed