

How to Use Restricted for Gas/Tolls/Parking

**ALL EXPENSES PAID FOR
WITH RESTRICTED MUST
BE UNDER A TRAVEL REP'S
NAME!!! ANY NON-TRAVEL
REP THAT PAYS WILL NOT
BE REIMBURSED
THROUGH RESTRICTED.**

REMINDERS:

Submit all receipts and a travel receipt log **within 3 days** of your club's return. Each travel rep that wants reimbursement will have to fill out a travel receipt log and turn in receipts!

Example:

Gas and toll receipts – turn in receipts along with travel receipt log.

Receipt 1 (Left):
DEER TRAIL 66
10169795
555 7TH AVE
TRAIL, CO
03:44:26 PM
109922439
MASTERCARD
INVOICE 154133
AUTH 00-989733
REF 790230426151541
PUMP# 3
REGULAR 15.8076
PRICE/GAL 2.499
FUEL TOTAL \$ 39.50
CREDIT \$ 39.50
Batch: 79 Seq Num: 23
Term ID: 3
ZIP ENTERED
Workstation ID: 00
WANT FREE GAS?
REGISTER TO WIN AT
WWW.GASVISIT.COM

Receipt 2 (Middle):
WELCOME
10138303
TRAVEL SHOPPE 6
2423 ENTERPRISE
GOODLAND KS
67735
DATE 04/24/15 16:14
PUMP # 05
PRODUCT: REGULAR
GALLONS: 13.584
PRICE/G: \$ 2.429
FUEL SALE \$ 33.00
DEBIT Acct: [Redacted]
AUTH: 00-253238
Batch: 62 Seq: 016
STAN #:101127 FND
Term Seq #: 593173
INVOICE: 161127
Tran: 192897
DEALER#: 10138303
Term ID: 21
WANT FREE GAS?
REGISTER TO WIN AT
WWW.GASVISIT.COM
THANK YOU
HAVE A NICE DAY

Receipt 3 (Right):
TURNPIKE AUTHORITY
RECEIPT
CLASS: 02 AMOUNT \$ 1.10
ENTRY PLAZA: 202
EXIT PLAZA: 183
DATE: 04/24/15 TIME: 13:06:57
COLLECTOR: 1359
SEQ. N.M.: 1018
KTA
Pay Less with a K-TAG
www.KTA.com

Callout 1 (Top): Make sure the dates on each receipt match departure and return dates on DSEKU Travel Form

Callout 2 (Right): Toll receipt

Callout 3 (Bottom): Travel Reps may only turn in THEIR receipts. We will not except travel logs with receipts containing more than two different credit card transactions.

Example:

Travel receipt log – found at <http://recreation.ku.edu/sport-clubs-resources>

KU Sport Clubs Travel Receipt Log

Directions:

- 1) Each Travel Representative wishing to receive reimbursement must turn in a Travel Receipt Log.
- 2) Submit all travel receipts with this document within 5 Business Days of Return. (Gas, Toll, Hotel, Entry Fees)
- 3) Receipts will only be accepted if legible, within the travel dates on the corresponding ITT, and contain only travel purchases (no food, drink, or non-travel-related purchases will be reimbursed).

Sport Club: Womens Ultimate

Date Submitted: 5/1/15

Destination: Denver, Colorado

Travel Dates: 4/24/15 - 4/27/15

Travel Representative: Jordan Alonzo

Use the same dates found on the DoSportsEasyKu Travel Form

Gas Receipts		
1)	\$ 39.50	\$
2)	\$ 31.60	\$
3)	\$ 33.00	\$
4)	\$	\$
5)	\$	\$
6)	\$	\$
7)	\$	\$
8)	\$	\$
9)	\$	\$
10)	\$	\$
Total Gas Cost:		\$ 104.1

Toll Receipts	
1)	\$ 1.10
2)	\$
3)	\$
4)	\$
5)	\$
6)	\$
7)	\$
8)	\$
9)	\$
10)	\$
Total:	\$ 1.10

Make sure these match the receipts and then add them up

TOTAL RECEIPTS: \$ 105.2

By signing this, I confirm that I have turned in the aforementioned receipts:

Signature: [Signature]

Date: 4/30/15

Program Manager Approval: _____ Sport Club Coordinator Approval: _____

Example:

Parking Receipt (from a hotel parking garage) – Turn this in with any other receipts and the receipt log.

Make sure this is in a Travel Rep. Name

8/24/2015

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Holiday Inn

114

03-01-13

Apollo Nida	Folio No. :	201013	Room No. :	0723
Po Box 4444	A/R Number :		Arrival :	10-24-12
Atlanta Ga	Group Code :		Departure :	10-25-12
Atlanta GA 31126	Company :		Conf. No. :	61713328
US	Membership No. :	PC 15824457	Rate Code :	IGCOR
	Invoice No. :		Page No. :	1 of 1

Date	Description	Charges	Credits
10-24-12	Parking: Self	18.00	
10-24-12	Room Accommodations	104.00	
10-24-12	Sales Tax - 8%	8.32	
10-24-12	Occupancy Tax - 8%	8.32	
10-25-12	American Express XXXXXXXXXX		138.64
Thank you for staying at the Holiday Inn Select Atlanta Capitol Office Center. Qualifying points for this stay will automatically be credited to your account. To make additional reservations online, update your account information or view your statement please visit www.priorityclub.com . We look forward to welcoming you back soon.		Total	138.64
		Balance	0.00

Guest Signature: _____

I have received the goods and / or services in the amount shown herein. I agree that my liability for this bill is not waived and agree to be held personally liable in the event that the indicated person, company, or associate fails to pay for any part or the full amount of these charges. If a credit card charge, I further agree to perform the obligations set forth in the cardholder's agreement with the issuer.