PO Box 1000
Eau Claire, WI 54702-1000

Phone: 1-800-844-8260
ext 6377 for Jen or 8138 for Geri

2025 REIMBURSABLE EXPENSES

Dept: _____

Please return form w/ detailed copies of receipts showing pymt method within 30 days of seminar or expenses may not be reimbursed.

Seminar State & Title: _____ Event Code: _____

Speaker Name: _____ Event Dates: _____

Date Expense Incurred									TOTAL $$
Hotels (Room + Taxes Only)									$ -
Airfare/ Baggage Fees									$ -
Ground Transportation (Taxi, Shuttle, Train, etc)									$ -
Rental Car									$ -
Gas for Rental Car									$ -
Parking									$ -
Tolls									$ -
Miscellaneous (please add note)									$ -
Miles driven w/personal car (2025 IRS Mileage Rate $ 0.70)								Total Miles X .70 =	$ -

Standard Per Diem Rate Calculation: Speaking/Travel Day (Full) @$ 75 + Speaking/Travel Day (Half) @ $ 50			
Per Diem Rate	Rate	# of Days	Total
Full Speaking or Travel Day	$75.00		$0.00
Half Speaking or Travel Day	$50.00		$0.00

SUBTOTAL:	$ -
Per Diem Total	$0.00
TOTAL DUE:	$ -

Rev 11/2024

SCAN & EMAIL with PDF receipts to: expenses@pesi.com
OR FAX TO: 715-855-8139

For addt'l copies of this form & FAQ's, go to: www.pesi.com/speakerinfo

Finance Use Only: Purchase Order #	
Paid Date:	

Add Special Travel Notes Here: