Oregon Society of Tax Consultants, Inc. SPEAKER AGREEMENT

"Please fill out W-9 on the back of this form!"

		sultants (hereafter referred to as OSTC) is presenting a sem	
or education class to the	public, and wishes	s to retain the services of	
		instructor in whole or in part of such seminar or education into the following agreement:	ai
Rate: OSTC will pay the	speaker \$	_per hour for actual instruction (see standing rules for hr.	rates)
Mileage: OSTC will rein	nburse the speake	er for travel expense at the current IRS mileage rate.	
agreement, and in no ever will receive reimbursement	ent shall exceed \$1 ent at that rate. Me	ned need and must be agreed upon before the signing of the 150/night. However, speaker must stay at the Event's Hote eals may be provided but the number of meals and amount ng of this agreement. (See reimbursement Policy)	l and per
Location, Date & Time			
		_ Time:	
Speaker's Topic:			
Equipment: To be provi	ded by OSTC		
OSTC members, only on A certificate of continuin	the day of instruction may l	vent at no charge. Meals are provided to speakers who are ction. be provided according to the guidelines set by the State of S, or other licensing boards.	not
Education Representative agreed to ahead of time a their handouts but are sti	e. Speaker's hando and initialed by bo Il limited to no mo	e printed material for the class 2 weeks prior to the event to outs will be limited to 50 single sided pages, unless previous the parties here: or; Speakers may make copies ore than 50 copies per attendee and shall be reimbursed at e such copies to the Education Chair 2 weeks prior to even	usly of the
pay a cancellation fee of	\$200. If OSTC ca	ncel within 60 days of the seminar, he/she shall be required ancels after the contract is signed, they will pay a cancellation instruction rate. (No cancellation fee will be assessed to a	ion
AGREED to by the signi	ng of this:		
Speaker Signature	Date	OSTC Education Representative Date	
Address:		Address:	
Telephone:		Telephone:	
E-Mail:		E-Mail:	
Federal ID #		Fax #:	
fee of 2 hours of the speanon-paid speaker). AGREED to by the signi Speaker Signature Address: Telephone: E-Mail: Federal ID #	nker's agreed uporing of this: Date	OSTC Education Representative Date Address:	ı

Please send Original of this Agreement to the Education Representative who signed above and send a copy to: Dona Cole, OSTC State Treasurer, 3157 U Street, Springfield, OR 97477 541-741-0438 or scan & email both front and back to: Treasurer@ostcinc.org