**ABRECHNUNGSFORMULAR**(Ansätze gem. Anhang III PVO)

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| Monat/Jahr: |       |  | Teilkirchgemeinde: |       |

[ ]  Sigristenstellvertretung [ ]  jährliche Grossreinigung [ ]

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| Name: |       |  | Vorname: |       |
| Adresse: |       |  | PLZ / Ort: |       |
| Geb.Datum: |       |  | AHV-Nr: | 756.      |
| Nationalität: |       |  | Ausweis: | [ ]  B 🡺 Fragebogen QS ausfüllen [ ]  C |
| E-Mail: |       |  | Telefon-Nr: |       |

 **Angaben Zahlungsverbindung: (oder Einzahlungsschein beilegen)**

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| Bankverbindung / Post: |  |       |
| (Genaue Anschrift) |  |  |
| IBAN-Nummer: |  | CH      |

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| **Datum** | **Ausgeführte Arbeiten** | **Reinigung etc.****Anzahl Std.** | **Anlässe****Anzahl Std.** | **Gottesdienste****Anzahl** |
|       |       |       |       |       |
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| **Total** |       |       |       |

**Visum Pfarrer/in oder Kirchenpflege: Unterschrift Arbeitnehmer/in:**