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| Abrechnung für Frauen-Gesprächskreise |

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| --- | --- | --- | --- | --- | --- |
| Bitte einsenden an: |  | **Gesprächskreis in:** | | |  |
| (regionale) |  |  | | |  |
| KEB - Katholische Erwachsenenbildung |  | Ort: | |  | |
| **im Landkreis Schwandorf e.V.** |  |  | |  | |
| **Kreuzberg 4** |  | Pfarrei: | |  | |
| **92421 Schwandorf** |  |  |  | | |
|  |  |  |  | | |
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| --- | --- | --- | --- |
| Datum des  Treffens | Uhrzeit  von/bis | Zahl der  Teilnehmerinnen/  Teilnehmer | **Thema des Treffens:** |
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Leiterin:

|  |  |  |
| --- | --- | --- |
|  |  |  |
| Name, Vorname |  | Datum/Unterschrift |
|  |  |  |
|  |  |  |
| Straße, PLZ, Ort |  | Telefon |
|  |  |  |

**Bitte das Formular auch auf der Rückseite sorgfältig ausfüllen und unterschreiben!**

## Abrechnung

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|  |  |  |  |  |  |  | **Treffen mit** Fremdreferentin/Fremdreferenten |

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Honorar: |  | Treffen á 30,-- € / | = |  | € |  | Honorar: | |  |  | = |  | € |
|  |  | 35,- € |  |  |  |  | Fahrtkost.: |  | | km x 0,40 | = |  | € |
|  |  |  |  |  |  |  | Sonstige Kosten | |  |  | = |  | € |
|  |  |  |  |  |  |  | Gesamtkosten | |  |  | = |  | € |

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| **Einnahmen** |  |  | | |  |  |  |  | **Einnahmen** |  | |  |  |  |  |
| Teilnahmegebühren | | |  | x3,50 € | = |  | € |  | Zusätzl. TN-Geb. |  | |  | = |  | € |
| Sonstige Einnahmen | | |  |  | = |  | € |  | Sonst. Einnahmen | |  |  | = |  | € |
| Gesamteinnahmen | | |  |  | = |  | € |  | Gesamteinnahmen | |  |  | = |  | € |
|  | | |  |  |  |  |  |  |  | |  |  |  |  |  |
| Differenz/Defizit | | |  |  | = |  | € |  | Differenz/Defizit | |  |  | = |  | € |

# Zahlung an die Leiterin

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| An die Leiterin wurden am | | | |  | | | € | | |  | | | | ausbezahlt. | | | | | | |  | Von Referentin/vom Referenten | | |
|  | | | | Datum | |  | | | Betrag | | | | |  | | | | | |  | | **auszufüllen** | | |
| Der Restbetrag soll überwiesen werden an: | | | | | | | | | | |  | | | |  | |  |  | |  | |  | | |
|  | | | | | | | | | | | |  | |  | | |  | | |  | | |  | | --- | |  | | | |
| Kontoinhaber/in | |  | | | | | | | | | | |  | | |  | | | |  | | Name, Vorname | | |
|  | | |  | | | | | | | | | |  | | |  | | | |  | | |  | | --- | |  | | | |
|  |  | | | | | | | | | | | | | | | | | | |  | | Straße | | |
| Bank |  | | | | | | | | | | | | | | | | | | |  | | |  | | --- | |  | | | |
|  |  | | | | | | | | | | | | | | | | | | |  | | Ort | | |
| IBAN |  | | | | | | | | | | | | | | | | | | |  | | IBAN |  |  |
| BIC |  | | | | | | | | | | | | | | | | | | |  | | BIC |  |  |
| **Erklärung** | |  | | |  | | |  | | | | | | | | | | | |  | |  | | |
| Es wird versichert, dass diese Veranstaltung bei keiner anderen Stelle abgerechnet wird. | | | | | | | | | | | | | | | | | | |  |  | | |  |  | | --- | --- | | Bank |  | | | |
| Ich/Wir haben zur Kenntnis genommen, dass das Honorar von der KEB nicht versteuert wird und ggf. von mir selbst versteuert werden muss (nach § 3 Nr. 26 Einkommenssteuergesetz beträgt der Steuerfreibetrag 3.000 € jährlich).  Leiterin \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Datum/Unterschrift | | | | | | | | | | | | | | | | | | | |  | | |  |  |  |  | | --- | --- | --- | --- | |  |  | |  | | Datum | |  | Unterschrift Referentin/Referent |   **Erklärung:**  Es wird versichert, dass diese Veranstaltung bei keiner anderen Stelle abgerechnet wird.  Ich/Wir haben zur Kenntnis genommen, dass das Honorar von der KEB nicht versteuert wird und ggf. von mir selbst versteuert werden muss (Steuerfreibetrag: 3.000 € jährlich). | | |

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| ANLAGEN | | |  | | | | |  | | | | | VON DER REGIONALEN KEB AUSZUFÜLLEN | | | | | | | | | | | | | |
|  | Teilnahmeliste(n) | | | | | | |  | | | | | Honorar |  | | | | |  | | |  | | € | | |
|  | Protokolle | | | | | | |  | | | | | ./. Teiln.geb. für | | | |  | | | | Pers. |  | | € | | |
|  | |  | | | | | |  | | | | | ./. sonst. Einnahmen | | | | |  | | |  |  | | € | | |
| Nachbestellung von Formularen | | | | | | | |  | | |  | |  | | | | |  | | |  |  | |  | | |
|  | | | | | | | | | |  |  | | Auszahlungsbetrag | | | | |  | | |  |  | | € | | |
| Ich bitte um Zusendung von Vordrucken | | | | | | |  | | | |  | |  | | | | |  | | |  | |  |  | | |
|  | | | | | | | | |  | | |  | zur Zahlung angewiesen | | | | | | |  | | |  | | |  |
|  | Protokolle | | |  | | Abrechnungen | | | | | | | überwiesen am | |  | | | | | | | |  | | |  |
|  |  | | | |  | | | | | | | |  | |  |  | | | | | | |  | |  | |
|  | Teilnahmelisten | | | |  | | | | | | | |  | |  |  | | | | | | |  | |  | |

(KEB Rgbg. 01/2021)