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| Raum für Eingangsstempel | **Reisekostenrechnung**  Bitte Vorder- und Rückseite in  Druckbuchstaben ausfüllen | HHJ | Kapitel | Titel | HÜL-Nr. |
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| Sachlich -und- Rechnerisch richtig  Richtig und vollständig erfasst.  ……………………….. …………………………...  Datum Unterschrift | | | |

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| VOM ANTRAGSTELLER AUSZUFÜLLEN - Korrekturen (z.B. streichen, radieren, übermalen) sind hier nicht zulässig - | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Personalnummer beim LBV | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Arbeitsgebiet  beim LBV | | | | | | | | | | | | | | | | | | | | | | Bitte stets angeben, wenn die Bezüge vom Landesamt für Besoldung und  Versorgung (LBV) gezahlt werden. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 11 | | | | | Empfangsberechtigter (Name, Vorname) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | |
| - 36 - | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 12 | | | | | | Straße, Haus-Nr. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 13 | | | | | PLZ | | | | | | | | | | | | | 14 | | | | | Ort | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| - 17 - | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | - 5 - | | | | | | | | | | | | | | | | | | - 16 - | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Ants-/Dienstbezeichnung | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Bes./Verg.Gr. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Mit Wohnung? | | | | | | | | | | | | | | | | | | | | | | | | | | | | Trennungsgeldbezieher | | | | | | | | | | | | | | | | | | | | | | |
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