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| **Abrechnung über durchgeführte Honorarstunden** | | | | | |
| **Bezeichnung der Beratungsstelle:** | | | | | |
| **Name der Honorarkraft:** | | | | | |
| **Berufsbezeichnung:** | | | | | |
| **Datum** | **Zahl der geleisteten Stunden je 60 Minuten** |  | **Vereinbarte Stundenvergütung €** |  | **€** |
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|  |  | x |  | = |  |
| **Insgesamt** | **Std.** | **x** | **€** | **=** | **€** |
| Die Abrechnung stimmt mit den Angaben im Honorarstundennachweis überein. | | | | | |
|  | |  |  | | |
| **Unterschrift Honorarkraft** | |  | **Sachlich und rechnerisch richtig** | | |