Staatliches Schulamt…………………………………………………………………

Dezentraler Wettkampf:………………………………………………………………

Schule:………………………………………………………………………………….

Termin:………………………………………………………………………………….

**Auszahlungsliste**

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| Nr. | Name | Vorname | Funktion | Aufwandsentschädigung in € | Geld erhalten/Unterschrift |
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