


A Personal-Nr. | Kd-Nr. | Arbeitgeber-Nr. | Dienstst. | UST | Abt. | Sachb. | Gbl. | Sei. | kein Druck | kein Druck | UST | 4109#
 123456 7 | 1000 | 00000000200 | 16000 | 16000 | 33 | L111 | 1 | 1 | von | bis | 1 | 4109#

AbrKrs/Absender vertrauliche Personalsache
 LSF, Außenstelle Leipzig, Bezügestelle
 Postfach 101045, 04010 Leipzig

B für Februar 2023
 Gült als Verdienstbescheinigung!
 Bitte sorgfältig aufbewahren!

DV 0,70 Deutsche Post 
 K4000 *B07*28*002481*

Frau
 Dr. Manuela Musterfrau
 Musterweg 2
 12345 Musterstadt

Ihr/e Sachbearbeiter/in:
 Mustermann, Max
 Raum: 111 Tel: 0351/123 45678

| | | | | | | | | | | | | | | |
|----------|---------------|------------------|--------------|------------|------------------|------------------------|------------------|------------------------|---------------|---------------|----------|---------------|--------------|----|
| Eintritt | Austritt | Besch-Zeit | Dienst-Zeit | Jubil-Zeit | Bankleitzahl/BIC | Konto-Nr./IBAN | Kontoinhaber | | | | | | | |
| 01.09.22 | | 01.09.22 | | 01.09.22 | BIC0DE1111 | DE12345678912345678912 | | | | | | | | |
| F | Geburts-Datum | Versicherungs-Nr | SV | Stl | Konf | Kinder- | Frei/HinzuBetrag | Frei/HinzuBetrag | Dienstwohnung | Dienstwohnung | PV-Zus | Unterbr.-Beg. | Unterbr.-End | Gr |
| S | L | 31.03.1980 | 08310380F123 | H | I | J | K | | ortl Mietwert | steu Mietwert | befr. | | | |
| L | SV-Pflicht | KV | RV | AV | PV | GZ | MFB | Krankenkasse | Einzugsstelle | M | ZV-Kasse | N | Fakt.Stk IV | |
| | 1 | 1 | 1 | 1 | | | | Techniker Krankenkasse | | | VBL | | | |

| 1 | Abrechnungsergebnisse | lfd. Monat | Vormonate | Summen | Monat | 18 | Jahr |
|----|----------------------------|-------------------|--------------|---|---------|----|----------|
| 1. | Tarif | | | Stpfl. Brutto | 2631,06 | | 17109,37 |
| 2 | Dauer-Beg. Dauer-end Tarif | 20020 | TVL AN 10080 | Sonst. Bezug § 39b | 1086,59 | | 1163,05 |
| | Gilt-ab Gilt-bis Tar-Grp | 01.01.18 01.01.21 | 3 10 | Lohnsteuer | 335,33 | | 1025,98 |
| | BDA TZ-Zähl TZ-Nenn | 09.14 20,0000 | 40,0000 | Sol-Zuschlag | 15,48 | | 19,59 |
| | Arb-Std/-Tag Arbz-V | | 6 5,0000 | Steuertage | 30 | | |
| 7 | JLL Entgelt | | 1661,25 | KV-Brutto | 2645,24 | | 17036,23 |
| 8 | JEE Jahres-SZ | | 1086,59 | KV-Brutto-2-EZ | 1092,45 | | |
| 9 | NNL VersAnt ZVK | | 14,18 | RV-Brutto | 2645,24 | | 17036,23 |
| 10 | Summe Gesamtbrutto | | 2747,84 | RV-Brutto-2-EZ | 1092,45 | | |
| 11 | Lohnsteuer | | -91,33 | AV-Brutto | 2645,24 | | 17036,23 |
| 12 | Lohnsteuer SB | | -244,00 | AV-Brutto-2-EZ | 1092,45 | | |
| | Solidaritätszuschl. | | -2,06 | PV-Brutto | 2645,24 | | 17036,23 |
| | Sol. Zuschlag SB | | -13,42 | PV-Brutto-2-EZ | 1092,45 | | |
| 13 | AN-Beitrag zur KV | | -113,35 | KV-AN | 193,10 | | 1243,64 |
| | AN-Beitrag zum ZB | | -15,53 | KVZusBeitrAN | 26,45 | | 170,36 |
| | AN-Beitrag zur RV | | -145,19 | KV-Tage-Sum | 30 | | 325 |
| | AN-Beitrag zur AV | | -23,29 | RV-AN | 247,33 | | 1592,88 |
| | AN-Beitrag zur PV | | -31,44 | RV-Tage-Sum | 30 | | 325 |
| | KV-AN-Beitrag-EZ | | -79,75 | AV-AN | 39,68 | | 255,53 |
| | ZB-AN-Beitrag-EZ | | -10,92 | AV-Tage-Sum | 30 | | 325 |
| | RV-AN-Beitrag-EZ | | -102,14 | PV-AN | 53,56 | | 345,00 |
| | AV-AN-Beitrag-EZ | | -16,39 | PV-Tage-Sum | 30 | | 325 |
| | PV-AN-Beitrag-EZ | | -22,12 | SV-AG-ANteile | 500,61 | | 3224,07 |
| 14 | Summe Nettobezüge | | 1836,91 | ZV-Brutto | 2747,84 | | 17991,44 |
| | AN-Beitrag ZV | | -116,78 | ZV-Brutto Vj. | | | 4665,16 |
| 15 | Auszahlungsbetrag | | 1720,13 | ZV-Umlage | 27,48 | | 179,90 |
| 16 | Kindergeld | | 192,00 | ZV-An-Beitrag | 116,78 | | 696,72 |
| 17 | Überweisungsbetrag | | 1912,13 | AG-Beitrag-Stfrei | | | 359,81 |
| | Steuer-ID 12345678910 | | | AN-Beitr-Stfrei | 116,78 | | 696,72 |
| | ELStAM | | | ZusBeitStfrei | 54,96 | | 359,81 |
| | Lieferdatum 27.02.2023 | | | Uml-S3Nr.56 | 27,48 | | 179,90 |
| | Gilt-ab 01.02.2023 | | | Arbeitgeberbrutto | 3338,50 | | 21571,51 |
| | | | | Bescheinigung nach § 108 Absatz 3 Satz 1 GewO | | | |

- A** Your personnel number
- B** Current payroll month
- C** Start of work contract
- D** BIC (Bank Identifier Code)
- E** International Bank account number
- F** Marital status
L - single, V - married, P - civil partnership, G - divorced, W - widowed
- G** Date of birth
- H** Social security number
- I** Tax bracket
Depends on your marital status and/or on your spouse's tax bracket. Bracket I is for single persons, brackets III/IV/V are available for married persons. Bracket VI should be avoided.
- J** Religion (church membership)
Members of the Roman Catholic Church or the Protestant Church pay church tax, which is taken directly from the salary and passed on to the respective church organisation. The information about religious affiliation is voluntary and is noted down during the registration at the city hall.
- K** Child tax credit
Guarantees that a certain amount of your income is not taxed but available as living expenses for your child(ren).
- L** Liability for social insurance
KV - Health insurance, RV - pension insurance, AV - unemployment insurance, PV - nursing insurance
- M** Responsible health insurer
and collecting agency for social security contribution
- N** Responsible supplementary insurance office

- 1** Payroll results
- 2** Start of validity of the tariff
- 3** Wage bracket
- 4** Salary group
Salary group and subgroup according to your qualification and previous work experience. After a few years, you automatically reach a higher subgroup.
- 5** Part-time working hours
in case of part-time employment (full time: 40 hours)
- 6** Allocation of working hours
number of working days per week
- 7** Taxable income (gross income)
- 8** Annual special payment (gross)
In November, you will receive a payment additional to your salary.
- 9** Total gross amount
taxable income and annual special payment
- 10** Income tax
The percentage of income tax is linked to your gross income, your tax bracket and other factors, and varies between 11 and 50%.
- 11** Income tax annual special payment
- 12** Employee contribution
to health insurance, pension insurance, unemployment insurance, nursing insurance
These insurances are mandatory and paid by the employer and by you. These amounts show your contributions.
- 13** Sum net salaries
total sum of gross salary minus the statutory deductions
- 14** Payment amount
- 15** Child benefit
If you have children, you are entitled to child benefit.
- 16** Transfer amount
- 17** Tax identification number
- 18** Annual total
Here you can see the different employee contributions per month (see left column "Monat") and the total sum per year (see this column).