



Baden-Württemberg

LANDESAMT FÜR BESOLDUNG UND VERSORGUNG

Vereinfachte Erklärung zur Auszahlung der Bezüge, zur Sozialversicherung, zur Zusatzversorgung und zum Lohnsteuerabzug - *Simplified Declaration for the Payment of Remuneration, Social Security, Supplementary Pension and Wage Tax Deduction*

Please note:

1. Please use this form only if you are an employee who
 - is reemployed immediately after the end of a contract and with no interruption or
 - is reemployed after a brief interruption of less than three months, provided you were not employed during that time
 and provided there were no changes to the information given in forms LBV 42101, LBV 42101s, LBV 42101z or LBV 42101zt since last filled in. In case of any changes, please resubmit the relevant form/s.
- 1.1 Please take note of the information in no. 2 "declaration" in case of taking up a marginal employment if there was no interruption or an interruption of one day up to more than two months.
2. The following information is necessary for the payment of your remuneration. Please see the information sheet on data protection ("Merkblatt zum Datenschutz") for information on the relevant legal provisions on the basis of which your data are collected. All questions must be answered, unless marked (optional).

1. Personal data

| | | | |
|----------------------------------|------------|---------------|---------------------------------|
| Last name | First name | Date of birth | Personnel number / area of work |
| Address (street, zip code, city) | | | |

2. Declaration

I hereby declare that there have been **no changes** to the information

- I have provided in the **declaration for the payment of remuneration** ("Erklärung zur Auszahlung der Bezüge", form LBV 42101) regarding my bank details.
- I have provided in the **declaration regarding social security** ("Erklärung zur Sozialversicherung", form LBV 42101s).

Please note:

If a new marginal employment follows

- a marginal employment that lasted until 31 December 2012 or longer and was uninterrupted (or **interrupted by only one day**) with a remuneration of up to EUR 400 or
 - a marginal employment started on or after 1 January 2013 with a remuneration of up to EUR 450 and with an **interruption of more than two months**, or
 - a short-term employment, or
 - an employment subject to social security contributions (in the latter two cases also without interruptions),
- the exemption from the statutory pension scheme, if desired, needs to be requested again with form **LBV 45201**.

- There have been no changes to the information provided in the **declaration regarding the supplementary pension** ("Erklärung zur Zusatzversorgung", form LBV 42101z).*
- There have been no changes to the information provided in the **declaration regarding the supplementary pension for artistic personnel and members of the orchestra** ("Erklärung zur Zusatzversorgung für das fest angestellte künstlerische Personal und für Orchestermitglieder (Tarifverträge NV Bühne und TVK)", form LBV 42101zt).

LBV 42101v – 01/15

There have been **changes** to the information in

- the declaration for the payment of remuneration ("Erklärung zur Auszahlung der Bezüge") **regarding my bank details**.
A new declaration (form **LBV 42101**) is attached.
- the declaration regarding social security ("Erklärung zur Sozialversicherung").
A new declaration (form **LBV 42101s**) is attached.
- the declaration regarding the supplementary pension ("Erklärung zur Zusatzversorgung").
A new declaration (form **LBV 42101z**) is attached.*
- the declaration regarding the supplementary pension for artistic personnel and members of the orchestra ("Erklärung zur Zusatzversorgung für das fest angestellte künstlerische Personal und für Orchestermitglieder (Tarifverträge NV Bühne und TVK)").
A new declaration (form **LBV 42101zt**) is attached.

*Please note:

Student assistants, trainee lawyers, interns or employed pensioners do not have to submit the declaration regarding the supplementary pension ("Erklärung zur Zusatzversorgung", form LBV 42101z).

3. Tax details

My tax identification number: _____

This employment is my

- main employment (employer is my "main employer").
Taxes will be calculated based on your individual tax criteria.
- secondary employment (employer is my secondary employer").
Taxes will be calculated based on tax bracket 6.

My tax criteria:

Tax bracket: _____ Religious denomination (my _____ /
own / my spouse's): _____

Please note:

Your income tax will be **provisionally** calculated based on your tax criteria.

As soon as possible, the Landesamt will obtain your tax criteria from the Federal Central Tax Office via your tax identification number. This data will then be used to calculate your income tax retroactively.

Declaration

I am aware that the information I have provided in this form may influence the amount I am paid. I confirm that the above information is both accurate and complete. I am also aware that I am obliged to immediately notify the Landesamt of any changes to the information above and that I will have to retroactively pay any social security contributions that were not paid because of incomplete information or failure to provide information.

Date, Signature

**Landesamt für Besoldung und
Versorgung Baden-Württemberg
70730 Fellbach**