**Beitragsgesuch an den Breitensteinfonds für den Ferienplausch**  
(Der Fonds bezweckt Unterstützungsleistungen an benachteiligte und bedürftige Kinder und Jugendliche bis zum 18. Altersjahr und deren Familien mit Wohnsitz im Bezirk Andelfingen)

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| **1. Adressat** | | | | | | | | | | | | | | | | | | | | | | |
| Zentrum Breitenstein, Landstrasse 36, 8450 Andelfingen | | | | | | | | | | | | | | | | | | | | | | |
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| **2. Personalien** | | | | | | | | | | | | | | | | | | | | | | |
| Name | | | | | | | |  | |  | Vorname | | | |  | | | | | | | |
| Adresse | | | | | | | |  | |  | PLZ/Ort | | | |  | | | | | | | |
| Geb.Datum (Kind 1) | | | | | | | |  | | (Kind 2) | | | | | | | | | | | | |
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| **3. Finanzielle Verhältnisse des Gesuchstellers** | | | | | | | | | | | | | | | | | | | | | | |
| Erhalten Sie Sozialhilfe?  **Falls ja, nur die Bestätigung beilegen**  **Falls nein, unten weiter ausfüllen** | | | | | | | |  |  | | | | | |  | | | | |  | | |
| Anzahl im Haushalt lebende Personen\_\_\_\_\_\_ | | | | | | | |  |  | | | | | | **Einnahmen** | | | | | **Ausgaben** | | |
| **Monatliches Einkommen netto** (Verdienst, Alimente inkl. Kinderzulagen, Renten, EL etc.) | | | | | | | | | | | | | | |  | | | | |  | | |
| **Feste monatliche Ausgaben** | | | | | | | | | | | | | | |  |  | | | |  |  | |
| Mietzins inkl. Nebenkosten | | | | | | | | | | | | | | |  |  | | | |  |  | |
| Versicherungsprämien Krankenkasse (abzügl. IPV) | | | | | | | | | | | | | | |  |  | | | |  |  | |
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| **Vermögen:** | |  | | | | | | | |  | **Schulden:** | | |  | | | | | | | | |
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| **Kopie des aktuellen Steuerausweis beilegen**  **4. Antrag** | | | | | | | | | | | | | | | | | | | | | | |
| **Zweck und Begründung / Eigenleistung** | | | | | | | | | | | | | | | | | | | | | | |
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| Gesamt zu finanzierende Kurskosten | | | | | | |  |  | | | | | | | | | | | | CHF | |  | | |
| Mögliche Eigenleistung | | | | |  | | |  | | | | | | | | | | |  | CHF | |  | |
| Total erforderlicher Betrag | | | | |  | | |  | | | | | | | | | | |  | **CHF** | |  | |
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| **Ort/Datum** | |  | | | | | | | |  | **Unterschrift** | | | |  | | | | | | | |
| **5. Bearbeitung des Gesuches (Leitung Zentrum Breitenstein)** | | | | | | | | | | | | | | | | | | | | | | |
| **Bemerkungen** | | | | | | | |  |  | | | | | | bewilligt | | | | | nicht nibnnicht bewilligt | | | | | |
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| **Ort/Datum** | |  | | | | | | | |  | **Unterschrift** | | | |  | | | | | | | |