**PODATKI O DAVČNEM ZAVEZANCU:**

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| (ime in priimek) |  | (davčna številka) |
|  |  |  |

)

(

podatki o bivališču: naselje, ulica, hišna številka

(

elektronski naslov

(poštna številka, ime pošte) (telefonska številka)

# ZAHTEVA

**za namenitev dela dohodnine za donacije**

**upravičencu:**

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Ime oziroma naziv upravičenca** | **Davčna šte upraviče** | | | | | **vilka**  **nca** | | | **Odstotek (%)** |
| **ZAVOD P.A.R.A.S.I.T.E.** | **9** | **2** | **0** | **0** | **7** | **9** | **6** | **1** |  |
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**šolskemu skladu oziroma skladu vrtca:**

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| **Ime oziroma naziv šolskega sklada ali sklada vrtca** | **Davčna številka šolske sklada** | | | | | | | **ga** | **Odstotek (%)** |
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V/Na \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, dne\_\_\_\_\_\_\_\_\_\_

## \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ podpis zavezanca/ke