**PODATKI O DAVČNEM ZAVEZANCU:**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(ime in priimek davčnega zavezanca)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(podatki o bivališču: naselje, ulica, hišna številka)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(poštna številka, ime pošte)

Davčna številka

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |  |

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(pristojni finančni urad)

**ZAHTEVA**

**za namenitev dela dohodnine za donacije**

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| ***Ime oziroma naziv upravičenca*** | ***Davčna številka upravičenca*** | | | | | | | | ***Odstotek (%)*** |
| **Slovensko združenje taijiquan hram CSN** | **7** | **9** | **1** | **9** | **6** | **8** | **4** | **5** | **1%** |

V/Na \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, dne\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

podpis zavezanca/ke