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| --- | --- | --- | --- | --- | --- | --- |
|  | | | |  | | załącznik do wniosku o zwrot podatku akcyzowego zawartego w cenie ON |
|  | Imię i nazwisko ……………………………………………………………………………………………………………... | | | | | |
|  | Adres zamieszkania…………………………………………………………………………………………………………… | | | | | |
|  | Numer telefonu ……………………………………………………………………….…………………………………….. | | | | | |
| **ZESTAWIENIE FAKTUR VAT** | | | | | | |
|  |  | **II termin** | | **sierpień 2017 roku** | | |
|  |  |  | |  | |  |
|  | Faktury za okres od **1 lutego 2017 roku do 31 lipca 2017 roku** | | | | | |
|  |  |  |  | |  | |
|  | **Lp.** | **Data sprzedaży ON (uporządkować wg dat zakupu )** | **Nr faktury VAT** | | **Ilość litrów** | |
|  | 1 |  |  | |  | |
|  | 2 |  |  | |  | |
|  | 3 |  |  | |  | |
|  | 4 |  |  | |  | |
|  | 5 |  |  | |  | |
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|  | 23 |  |  | |  | |
|  | 24 |  |  | |  | |
|  | 25 |  |  | |  | |
|  | **ilość litrów - strona 1** | | | |  | |
|  | 26 |  | |  |  | |
|  | 27 |  | |  |  | |
|  | 28 |  | |  |  | |
|  | 29 |  | |  |  | |
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|  | 58 |  | |  |  | |
|  | 59 |  | |  |  | |
|  | 60 |  | |  |  | |
|  | **ilość litrów - strona 2** | | | |  | |
|  |  |  | |  |  | |