

Pismo maszynowe: normalna czcionka - duże litery  
Pismo odręczne: duże drukowane litery, każda w osobnej kratce.

PP S.A. nr 519a

Polecenie przelewu / Wpłata gotówkowa

|                                                                                  |  |                                                       |  |     |  |        |  |       |  |  |  |  |  |  |                                                                       |  |  |  |  |                                                                                     |  |  |  |  |  |  |  |  |  |
|----------------------------------------------------------------------------------|--|-------------------------------------------------------|--|-----|--|--------|--|-------|--|--|--|--|--|--|-----------------------------------------------------------------------|--|--|--|--|-------------------------------------------------------------------------------------|--|--|--|--|--|--|--|--|--|
| nazwa odbiorcy                                                                   |  | Fundacja Avalon - Bezpośrednia Pomoc Niepełnosprawnym |  |     |  |        |  |       |  |  |  |  |  |  |                                                                       |  |  |  |  |                                                                                     |  |  |  |  |  |  |  |  |  |
| nazwa odbiorcy od.                                                               |  | Michała Kajki 80/82 lok. 1, 04-620 Warszawa           |  |     |  |        |  |       |  |  |  |  |  |  |                                                                       |  |  |  |  |                                                                                     |  |  |  |  |  |  |  |  |  |
| nr rachunku odbiorcy                                                             |  | 62160012860003003186426001                            |  |     |  |        |  |       |  |  |  |  |  |  |                                                                       |  |  |  |  |                                                                                     |  |  |  |  |  |  |  |  |  |
|                                                                                  |  | W P                                                   |  | PLN |  | waluta |  | kwota |  |  |  |  |  |  |                                                                       |  |  |  |  |                                                                                     |  |  |  |  |  |  |  |  |  |
| nr rachunku zlecniodawcy (polecenie przelewu) / kwota słownie (wpłata gotówkowa) |  |                                                       |  |     |  |        |  |       |  |  |  |  |  |  |                                                                       |  |  |  |  |                                                                                     |  |  |  |  |  |  |  |  |  |
|                                                                                  |  |                                                       |  |     |  |        |  |       |  |  |  |  |  |  |                                                                       |  |  |  |  |                                                                                     |  |  |  |  |  |  |  |  |  |
| nazwa zlecniodawcy                                                               |  |                                                       |  |     |  |        |  |       |  |  |  |  |  |  |                                                                       |  |  |  |  |                                                                                     |  |  |  |  |  |  |  |  |  |
|                                                                                  |  |                                                       |  |     |  |        |  |       |  |  |  |  |  |  |                                                                       |  |  |  |  |                                                                                     |  |  |  |  |  |  |  |  |  |
| nazwa zlecniodawcy cd.                                                           |  |                                                       |  |     |  |        |  |       |  |  |  |  |  |  |                                                                       |  |  |  |  |                                                                                     |  |  |  |  |  |  |  |  |  |
|                                                                                  |  |                                                       |  |     |  |        |  |       |  |  |  |  |  |  |                                                                       |  |  |  |  |                                                                                     |  |  |  |  |  |  |  |  |  |
| tytułem                                                                          |  |                                                       |  |     |  |        |  |       |  |  |  |  |  |  |                                                                       |  |  |  |  |                                                                                     |  |  |  |  |  |  |  |  |  |
| Konieczko, 17173                                                                 |  |                                                       |  |     |  |        |  |       |  |  |  |  |  |  |                                                                       |  |  |  |  |                                                                                     |  |  |  |  |  |  |  |  |  |
| tytułem cd.                                                                      |  |                                                       |  |     |  |        |  |       |  |  |  |  |  |  |                                                                       |  |  |  |  |                                                                                     |  |  |  |  |  |  |  |  |  |
|                                                                                  |  |                                                       |  |     |  |        |  |       |  |  |  |  |  |  |                                                                       |  |  |  |  |                                                                                     |  |  |  |  |  |  |  |  |  |
| pieczęć, data i podpis(y) zlecniodawcy                                           |  |                                                       |  |     |  |        |  |       |  |  |  |  |  |  | Opłata                                                                |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|                                                                                  |  |                                                       |  |     |  |        |  |       |  |  |  |  |  |  | <table><tr><td></td><td></td><td></td><td></td><td></td></tr></table> |  |  |  |  |                                                                                     |  |  |  |  |  |  |  |  |  |
|                                                                                  |  |                                                       |  |     |  |        |  |       |  |  |  |  |  |  |                                                                       |  |  |  |  |                                                                                     |  |  |  |  |  |  |  |  |  |

odcinek dla instytucji przyjmującej zlecenie

Fundacja Avalon - Bezpośrednia Pomoc Niepełnosprawnym

Michała Kajki 80/82 lok. 1, 04-620 Warszawa

6 2 1 6 0 0 1 2 8 6 0 0 0 3 0 0 3 1 8 6 4 2 6 0 0 1

W P P L N

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| Government          | Percentage |
|---------------------|------------|
| Current government  | 80%        |
| Previous government | 20%        |

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[illegible]

pieczęć, data i podpis(y) zleceniodawcy

Oplata



Polecenie przelewu / Wpłata gotówkowa

## Podciinek dla zleceniodawcy