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|  |  |  |  |  |  |  |  | **Załącznik nr 4 do instrukcji obiegu dokumentów** |
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| Nazwa i adres placówki  |  |  |  |  |  |  |  |  |  |  |
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|  | **POTWIERDZENIE UJĘCIA W WPF** |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |
| Numer właściwej uchwały Rady m.st. Warszawy zabezpieczającej środki w wieloletniej prognozie finansowej (WPF): …………….. |
| z dnia ………………. |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |
| kontrahent: (nazwa, adres)……………………………………………………… |  |  |  |  |  |  |
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| okres trwania umowy: od …………….…... do …………….. |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |
| wartość brutto umowy: ……………………. |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |
| Środki zabezpieczono w wieloletnim planie finansowym: |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |
| klasyfikacja budżetowa | zadanie budżetowe | Planowane wydatki brutto w poszczególnych latach | razem |  |  |  |
| rozdział/ paragraf/ obszar funkcjonalny |   | 20… | 20… | 20… | 20… |   |  |  |  |
|   |   |   |   |   |   |   |  |  |  |
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| Przygotował: |  |  |  |  | …………………………………………….. |  |  |  |  |
| nr telefonu: |  |  |  |  | data, podpis i pieczątka Kierownika jednostki |  |  |  |
| adres mailowy: |  |  |  |  |  |  |  |  |  |  |  |
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| Potwierdzam zabezpieczenie środków w wieloletnim planie finansowym jednostki.  |  |  |  |  |
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| …………………………………………………………………. |  |  |  |  |  |  |  |  |
| data, podpis i pieczątka pracownika DBFO ds. planowania |  |  |  |  |  |  |

**Załącznik nr 4a do instrukcji obiegu dokumentów**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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|  | **PRZYCHÓD dot. UMOWY (sprzedażowej)** |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
| **Załącznik do umowy nr ………………….. z dnia ……………… zawartej z ………………………………………………** |  |  |
| **okres trwania umowy od …………….…... do ……………..** |  |  |  |  |  |
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| **termin płatności umowy: …………………………………………………………………………………………………………** |  |  |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
|  |  | grupa kontrahenta RB-N |  |  |  |  |
|  |  | przedsiębiorstwa niefinansowe \* | instytucje niekomercyjne działające na rzecz gospodarstw domowych \*\* |  |  |  |  |
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| Objaśnienie: |  |  |  |  |  |  |  |
| \* | grupa kontahentów powyżej 10 osób w kolumnie przedsiębiorstwa niefinansowe |   |  |  |
| \*\* | grupa kontahentów do 10 osób instytucje niekomercyjne działające na rzecz gospodarstw domowych |   |  |
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| Przygotował: ………….. |  |  |  | ………………………………………………………… |
| nr telefonu: ……………. |  |  |  | data, podpis i pieczątka Kierownika jednostki |
| adres mailowy: ………. |  |  |  |  |  |  |
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|  | **PRZYCHÓD dot. UMOWY (sprzedażowej)** |  |  |  |  |  |