**……………………………………………………………………………………………………………………………………………….**

(nazwa i termin zawodów)

**KOSZTY SĘDZIOWSKIE**

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| **L.p.** | **Nazwisko i imię****PESEL** | **Data ur.** | **Adres zamieszkania** | **Urząd Skarbowy** | **Kwota brutto** | **Koszty uzyskania 20%** | **Kwota do opodatk.** | **Podatek 18 %** | **Kwota netto** | **Koszty przejazdu** | **Do wypłaty** | **Pokwitowanie** |
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| **RAZEM:** |  |  |  |  |  |  |  |  |

Wypłacił: …………………………………………………………………

 (czytelny podpis i data)