**IZJAVA O DOPRINOSU**

Ja, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, potvrđujem da ću projekat

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ podržati sledećim sredstvima, robom ili

uslugama ukoliko projekat dobije podršku lokalnog Divac omladinskog fonda:

|  |  |  |  |
| --- | --- | --- | --- |
| RB | Opis doprinosa | Zaokružiti | Iznos ili vrednost robe/usluge u din. |
| 1. |  | Roba / usluga / novac |  |
| 2. |  | Roba / usluga / novac |  |
| 3. |  | Roba / usluga / novac |  |

Ukupna vrednost doprinosa iznosiće \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ din.

Mesto i datum:

**Za fizička lica**

Ime i prezime:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Broj lične karte(za fizička lica)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ izdata od \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Potpis: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Za pravna lica**

Ime i prezime:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Naziv kompanije \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Funkcija:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Pečat i potpis \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_