

Руководителю филиала

ООО «УК Баден Групп» Филиала «Баден-Баден термы Уктус»

Зунтовой К.А

От

Заявление

Прошу вернуть денежные средства за В размере ( ) рублей. Причина возврата

**РЕКВИЗИТЫ ДЛЯ ПЕРЕЧИСЛЕНИЯ**

1. Получатель (ФИО)

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Фамилия |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Имя |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Отчество |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

1. Мобильный телефон

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| +7 |  |  |  |  |  |  |  |  |  |  |

1. Реквизиты банка

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| КПП |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Р/сч |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| БИК |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| К/сч |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

Дата

Подпись

Заявление принял (ФИО)

ЗАПОЛНЯЕТСЯ СОТРУДНИКОМ:

Время приема заявления Время прихода

Время ухода Комментарии