

Uplatio je (ime,
adresa i tel.) _____

IME I PREZIME _____

ADRESA STANOVANJA _____

Račun
pošiljaoca

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**Školarina –samofinansirajući studenti
koji I put upisuju II ciklus**

Račun
primaoca

1	4	1	1	9	6	5	3	2	0	0	0	8	4	7	5
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Depozitni račun Kantona Sarajevo

KM **1200**

HITNO

Samo za uplate javnih prihoda

Broj/JMB
poreskog
obveznika

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Vrsta
uplate

Mjesto i
datum
uplate

Sarajevo / /

Porezni period

Vrsta
prihoda

7	2	2	4	2	9
---	---	---	---	---	---

Od

--	--	--	--	--	--

Do

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Potpis i
pečat
nalogodavca

Općina

0	7	7
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Budžetska
organizacija

2	1	0	4	0	2	5
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Potpis ovlaštenog
lica

Poziv
na
broj

0	0	0	0	0	0	0	0	0	0	6
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PRIMJER 8