**ZAŁĄCZNIK**

do wniosku o zwrot podatku akcyzowego

na nazwisko …………………………………..

|  |  |  |
| --- | --- | --- |
| Lp. | Numer faktury | Data wydania faktury |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

 **………………………………………..**

 / podpis/