**Генеральному директору**

**Организатора питания**

**АО «ФИРМА ФЛОРИДАН»**

**Костенюк О.Ю.**

**г. Санкт-Петербург, ул. Большая Разночинная, д. 14, лит. А**

**от\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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**Паспорт\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, выдан\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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**(обязательно)**

**ЗАЯВЛЕНИЕ**

**О ВОЗВРАТЕ НЕИСПОЛЬЗОВАННОГО ПО «ШКОЛЬНОЙ КАРТЕ»**

**ОСТАТКА ДЕНЕЖНЫХ СРЕДСТВ**

**(заполнять заявление печатными буквами)**

**г. Санкт-Петербург «\_\_\_\_\_» \_\_\_\_\_\_\_\_\_ 2022 г.**

**Я,**

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**(Фамилия)**

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**(Имя)**

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**(Отчество)**

**являясь:⁪ Родителем; ⁪ Усыновителем; ⁪ Опекуном (Попечителем),**

**(нужное подчеркнуть)**

**несовершеннолетнего**

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**(Фамилия)**

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**(Имя)**

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**(Отчество)**

**ученика\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_класса,**

**образовательного учреждения ГБУ СОШ №\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**прошу возвратить мне остаток денежных средств, неиспользованных по Школьной карте номер**

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**(лицевой счет карты)**

**в сумме \_\_\_\_\_\_\_\_\_\_руб. \_\_\_\_ коп.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**(сумма цифрами) (сумма прописью)**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_руб.**

**Возврат денежных средств прошу произвести путем:**

**1. перечисления денег на мой расчетный счет (20 знаков) №**

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**(наименование банка)**

**БИК**

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**2. переводом денег на р/счет Организатора питания, обслуживающего Вашу школу;** ⁪**да, ⁪нет**

**Фамилия, Имя, Отчество\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**(прописью)**

**Дата\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Подпись\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**