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| **JUSTIFICANT D'AJUTS PER A L'ADQUISICIÓ DE LLIBRES I MATERIAL ESCOLAR** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Curs 2024-2025** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **Nom de l'AMPA o Centre educatiu que el presenta:** | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | |
| **DADES DE LA PERSONA QUE PRESENTA LA JUSTIFICACIÓ (pare, mare, tutor/a legal) :** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | |
| **Nom i cognom:** | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **Correu @** *(en lletres majúscules)* | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Telèfons (2)** | |  | | | | | | | |  | | | | | | | | | | | **NIF / NIE:** | | | | |  | | | | | | | | | | | | | |
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| **Dades bancàries (IBAN):** | | | | | Codi país | | | DC | | | entitat | | | Núm. oficina | | | | | | | | DC | | Núm. compte corrent o llibreta | | | | | | | | | | | | | | | |
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| **Cost total de tots els Justificats:** | | | | | | | | | | | | | | **€** | | | | |
| **Si la família cedeix un o els dos vals de 30 € de la Generalitat es descomptaran de l’import total justificat.** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **Alumnes per família** | | | | **nom** | | | | | | | | | **cognom** | | | | | | | | | | | | | | | | **curs** | | | **Total despesa** | | | | | | | |
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| **Justificant emès per a l'AJUNTAMENT DE SANT PERE DE RIBES** | | | | | | | | | | | | | | | | | | | | **Director/a del centre educatiu** | | | | | | | | | | | | | | | | | | | |
| **CERTIFICO:** | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | |

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| 1. Que el cost dels llibres de text i/o material escolar puja la quantitat de | € | | |
| 2. Que aquest import ha estat destinat íntegrament a: *(assenyaleu amb una X l'opció que correspongui)* | | | |
| 1. **A la quota AMPA establerta en concepte de llibres de text i/o material escolar socialitzat** | |  | |
| 1. **A la compra de llibres de text i/o material escolar** | |  | |
| 1. **A la compra d’ordinador o tablet** | |  | |
| **SOL·LICITO:**  Que l'import s'aboni mitjançant transferència bancària **al compte indicat més amunt**. | | |

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| **A nom de:** |  | | | | |
| **(especificar el nom de l'AMPA, del Centre educatiu o de qui s'hagi fet càrrec de la gestió dels llibres i/o material escolar,**  **titular del compte bancari assenyalat anteriorment)** | | | | | |
|  | |  | | |  |
| **Signatura del/la Director/a** | | **Segell** | | | **Signatura de la persona responsable de l'AMPA (si escau)** |
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| **Localitat:** |  | | **Data:** |  | |  |