Spett.le

**FIPAV C.R. Piemonte**

*Amministrazione*

 Strada del Meisino, 19

10132 Torino

piemonte@federvolley.it

Il sottoscritto

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| COGNOME |  | NOME |

in qualità di Presidente pro-tempore della Società Sportiva

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| ESATTA DENOMINAZIONE DELLA SOCIETA’ COME DA INTESTAZIONE DEL CONTO CORRENTE BANCARIO |

a seguito della sentenza della C.T.A. Sezione Distaccata Piemonte-Lombardia-Liguria-Valle d’Aosta

RICHIEDE

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| il rimborso della somma di | € |  |  |  | , |  |  |  | quale | 50% | o | 100% | Tassa Ricorso C.T.A. |

DICHIARA

sotto la propria responsabilità che il conto corrente sotto indicato è intestato alla Società

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