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| |  | | --- | | **Извещение** | | **Кассир** | | |  |  | | --- | --- | | |  | | --- | | *Форма № ПД-4* | | | |  |  | | --- | --- | | **Фонд детского доктора Рошаля** | КПП:770601001 | | | (наименование получателя платежа) | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | **7** | **7** | **0** | **6** | **4** | **7** | **1** | **3** | **3** | **2** | |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | **4** | **0** | **7** | **0** | **3** | **8** | **1** | **0** | **5** | **3** | **8** | **0** | **0** | **0** | **0** | **1** | **3** | **9** | **9** | **2** | | | (ИНН получателя платежа) |  | (номер счета получателя платежа) | | | |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | в | **ПАО Сбербанк г. Москва** | БИК | |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | | **0** | **4** | **4** | **5** | **2** | **5** | **2** | **2** | **5** | | |  | (наименование банка получателя платежа) |  |  | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | Номер кор/сч банка получателя платежа | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | **3** | **0** | **1** | **0** | **1** | **8** | **1** | **0** | **4** | **0** | **0** | **0** | **0** | **0** | **0** | **0** | **0** | **2** | **2** | **5** | | | | |  |  |  | | --- | --- | --- | | **Добровольное благотворительное пожертвование на уставные цели.** |  |  | | (наименование платежа) |  | (номер лицевого счета (код) плательщика) | | | |  |  | | --- | --- | | Ф.И.О плательщика |  | | | |  |  | | --- | --- | | Адрес плательщика |  | | | |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | | Сумма платежа |  | руб. |  | коп.  Сумма платы за услуги |  | руб. |  | коп. | | | |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | Итого |  | руб. |  | коп. | « |  | » |  | 201 |  | г. | | | С условиями приема указанной в платежном документе суммы, в т.ч. с суммой взимаемой платы за услуги банка, ознакомлен и согласен. | | |  |  |  | | --- | --- | --- | |  | **Подпись плательщика** |  | | |  | |
| |  | | --- | | **Извещение** | | **Кассир** | | |  |  | | --- | --- | | |  | | --- | | *Форма № ПД-4* | | | |  |  | | --- | --- | | **Фонд детского доктора Рошаля** | КПП:770601001 | | | (наименование получателя платежа) | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | **7** | **7** | **0** | **6** | **4** | **7** | **1** | **3** | **3** | **2** | |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | **4** | **0** | **7** | **0** | **3** | **8** | **1** | **0** | **5** | **3** | **8** | **0** | **0** | **0** | **0** | **1** | **3** | **9** | **9** | **2** | | | (ИНН получателя платежа) |  | (номер счета получателя платежа) | | | |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | в | **ПАО Сбербанк г. Москва** | БИК | |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | | **0** | **4** | **4** | **5** | **2** | **5** | **2** | **2** | **5** | | |  | (наименование банка получателя платежа) |  |  | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | Номер кор/сч банка получателя платежа | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | **3** | **0** | **1** | **0** | **1** | **8** | **1** | **0** | **4** | **0** | **0** | **0** | **0** | **0** | **0** | **0** | **0** | **2** | **2** | **5** | | | | |  |  |  | | --- | --- | --- | | **Добровольное благотворительное пожертвование на уставные цели.** |  |  | | (наименование платежа) |  | (номер лицевого счета (код) плательщика) | | | |  |  | | --- | --- | | Ф.И.О плательщика |  | | | |  |  | | --- | --- | | Адрес плательщика |  | | | |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | | Сумма платежа |  | руб. |  | коп.  Сумма платы за услуги |  | руб. |  | коп. | | | |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | Итого |  | руб. |  | коп. | « |  | » |  | 201 |  | г. | | | С условиями приема указанной в платежном документе суммы, в т.ч. с суммой взимаемой платы за услуги банка, ознакомлен и согласен. | | |  |  |  | | --- | --- | --- | |  | **Подпись плательщика** |  | | |  | |