**FEDERAZIONE ITALIANA DI ATLETICA LEGGERA**

### DELIBERA C.F. n° PROG.

**O.D.A.**

## NOTA DI LIQUIDAZIONE PER RIUNIONI E TRASFERTE

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| **Il sottoscritto** | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | **nato a** | | | | | | |  | | | | | | | | | | | | | | | | | | | **il** | |  | | | | | | | |
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| **residente a** | | | | |  | | | | | | | | | | | | | | | | | | | **cap** | | | | |  | | | | | | **Via/P.zza** | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | **n°** |  | | | | | |
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| **Codice Fiscale** | |  | | |  | |  | |  | | |  | | |  | | | | |  |  | | |  | |  | | | |  | | | | | |  |  | | |  |  | | | | |  | | |
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| **dichiara di aver effettuato in qualità di** | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **la trasferta** | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | **dal giorno** | | | | | | | | | | |  | | | | | | | | | | | **al giorno** | | |  | | | | | | | | | |
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| **1.** | **SOMME DA RIMBORSARE** | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | **SPAZIO RISERVATO** | | | | | | | | |  | | |
|  | **A)** | | **spese di viaggio** *(documentate)* | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | **ALL’UFFICIO** | | | | | | | | |  | | |
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|  |  | | **⬩** | **autostrada** *(pedaggio)* | | | | | | | | | | | | | | | | | | | | | | | **€** |  | | | | | | | | | | |  | | | | | | | | |  | | | | |  | | | | |  | | | | | | | | |  | | |
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|  |  | | **⬩** | **biglietto aereo** *(autorizzazione allegata)* | | | | | | | | | | | | | | | | | | | | | | | **€** |  | | | | | | | | | | |  | | | | | | | | |  | | | | |  | | | | |  | | | | | | | | |  | | |
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|  |  | | **⬩** | **biglietto FF.SS.** | | | | | | | | | | | | | | | | | | | | | | | **€** |  | | | | | | | | | | |  | | | | | | | | |  | | | | |  | | | | |  | | | | | | | | |  | | |
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|  |  | | **⬩** | **servizi di linea** | | | | | | | | | | | | | | | | | | | | | | | **€** |  | | | | | | | | | | |  | | | | | | | | |  | | | | |  | | | | |  | | | | | | | | |  | | |
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|  |  | | **⬩** | **spese taxi** | | | | | | | | | | | | | | | | | | | | | | | **€** |  | | | | | | | | | | |  | | | | | | | | |  | | | | |  | | | | |  | | | | | | | | |  | | |
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|  |  | | **⬩** | **spese parcheggio** | | | | | | | | | | | | | | | | | | | | | | | **€** |  | | | | | | | | | | | **totale €** | | | | | | | | |  | | | | |  | | | | |  | | | | | | | | |  | | |
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|  | **B)** | | **spese di vitto e alloggio** *(documentate)* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | |  | | | | | | | | |  | | |
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| **2.** | **INDENNITÀ CHILOMETRICA** *(autorizzazione allegata)* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | |  | | |
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|  | **percorrenza da** | | | | | | | |  | | | | | | | | | | | **a** | | |  | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | |  | | | | | | | | |  | | |
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| **3.** | | **INDENNITA’ PER ATTIVITA’ Italia**  **Art. 67/m n° \_\_\_\_\_giorni a € \_\_\_\_\_\_**  **estero**  **n \_\_\_\_\_\_giorni a € \_\_\_\_\_\_** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | **Totale €** | | | | |  | | | | | |  | | | | | | | | | | |  | | |  | | | | | | | | |  | | | | | |
|  | | **TOT to** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | |  | | |  | | | | | | | | |  | | | | | |
|  | | **TOTALE LORDO** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | **€** | | | | | |  | | | | | | | | | | |  | | |  | | | | | | | | |  | | | | | |
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|  | | **DICHIARAZIONE DEL PERCIPIENTE - Il sottoscritto dichiara, sotto la propria responsabilità, di aver effettuato la missione così come sopra indicato.** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | **Data** | | | | |  | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | **X** | | | | | | | | | | | | | | | | | | | | |  | | | | | | |
|  | | (firma leggibile) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

Il sottoscritto dichiara sotto la propria responsabilità di non aver superato, con il pagamento del suddetto compenso, il limite di euro 5.000,00 previsto dall’art.36, G.Lgs.36/2021. S’impegna, inoltre, a comunicare alla FIDAL se il superamento di detto limite avvenisse al ricevimento delle somme richieste.

**X**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(firma leggibile)

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|  | **(luogo e data)** |  |  |  | **(firma del Dirigente)** |  |

Cod.IBAN

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