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| **UNIVERZITA TOMÁŠE BATI VE ZLÍNĚ**  |
|  |
|  Ve Zlíně: |
| ŽÁDOST O ÚHRADU PUBLIKAČNÍHO POPLATKU |
|  |
| Pracoviště: **.........................................................** |
| Žádáme o úhradu publikačního poplatku celkem Kč **...........................................** |
| v **...........................................................................................................................................** |
| (název časopisu, knihy) |
|  |
|  druh: článek v časopise, kapitola v knize |
| (nehodící se škrtněte) |
|  |
| ~~Program:~~ **~~..................................................................................................................................~~** |
| **~~...............................................................................................................................................~~** |
| ~~Pořádaná ve dnech:~~ **~~.........................................~~** ~~v~~ **~~......................................................................~~** |
| ~~Pořadatel:~~ **~~.................................................................................................................................~~** |
| ~~Zúčastní se: p.~~ **~~............................................................~~** ~~Kč~~ **~~.................................................~~** |
|  ~~p.~~ **~~............................................................~~** ~~Kč~~ **~~.................................................~~** |
|  ~~p.~~ **~~............................................................~~** ~~Kč~~ **~~.................................................~~** |
|  ~~p.~~ **~~............................................................~~** ~~Kč~~ **~~.................................................~~** |
|  CELKEM Kč |
|  =================== |
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| Úhradu proveďte z: |
|  nákladové středisko **......................................** |
|  zdroj **......................................** |
|  SPP **......................................** |
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| ROZPIS poplatku: publikační poplatek **.........................................** |
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| PŘÍLOHY: **.....................................................................................................................** |
|  **.....................................................................................................................** |
|  **.....................................................................................................................** |
|  |
|  SPRÁVCE ROZPOČTU PŘÍKAZCE OPERACE |
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| Poznámka: Bez rozpisu konferenčního poplatku nebude poplatek proplacen. |
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