**RECIBÍ**

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| El proveedor | |  | | | | | | | | , |
| con NIF |  | | y domicilio en | | | |  | | | |
| ha recibido de la entidad | | | | |  | | | | | |
| con NIF |  | | | , | | la cantidad en efectivo de | |  | €. | |

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| **La cantidad abonada en efectivo se ha recibido por parte del proveedor a fecha** |  |
| **como pago de la/s siguiente/s factura/s:** | |

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| **Nº de factura** | **Fecha factura** | **Importe** | **Concepto** |
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| Fdo: |  | | | | | | | |
|  | Firma y NIF de la persona receptora del cobro y sello del proveedor | | | | | | | |