**LISTA OSÓB POPIERAJĄCYCH KANDYDATA NA ŁAWNIKA (kadencja 2020-2023)**

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**Imię (imiona) i nazwisko kandydata**

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| **Lp.** | **Imię (imiona)****i Nazwisko** | **Adres stałego zamieszkania** | **Pesel** | **Własnoręczny podpis** |
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