**LISTA ODÓB ZGŁASZAJĄCYCH KANDYDATA NA ŁAWNIKA W KADENCJI 2016-2019**

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 (imię i nazwisko kandydata na ławnika) PESEL

| **Lp.** | **Imię(imiona) i nazwisko** | **Numer ewidencyjny PESEL** | **Miejsce stałego zamieszania** | **Własnoręczny podpis** |
| --- | --- | --- | --- | --- |
| 1. |  |  |  |  |
| **Pierwsza osoba na liście uprawniona jest do składania wyjaśnień w sprawie zgłoszenia kandydata na ławnika przez obywateli** |
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