

**LISTA POPARCIA**

**KANDYDATA ZGŁOSZONEGO DO MŁODZIEŻOWEJ RADY GMINY SZYDŁOWO**

………………………………………………………………………………………………………………………………………………………….

(imię i nazwisko kandydata, wiek, klasa)

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| Lp. | Imię i Nazwisko | Adres zamieszkania | Klasa/wiek | Podpis |
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