**LISTA OSÓB POPIERAJĄCYCH KANDYDATA NA ŁAWNIKA**

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| Imię i nazwisko kandydata na ławnika | Adres zamieszkania kandydata na ławnika |
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| Lp. | Imię (imiona) | nazwisko | Numer pesel | Miejsce stałego zamieszkania | Własnoręczny Podpis |
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