**Lista osób posiadających czynne prawo wyborcze zgłaszających kandydata na ławnika na kadencję 2020-2023**

**Imię i nazwisko kandydata**: ………………………………………………………………………………………… **PESEL:** …………………………………………………...

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| **Lp.** | **Imię/imiona** | **Nazwisko** | **Nr ewidencyjny PESEL** | | | | | | | | | | | **Miejsce stałego zamieszkania** | | **Własnoręczny podpis** |
| **Miejscowość** | **Ulica/nr domu/nr lokalu** |
| 1. |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **Pierwsza osoba na liście jest uprawniona do składania wyjaśnień w sprawie zgłoszenia kandydata na ławnika** | | | | | | | | | | | | | | | | |
| 2. |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 3. |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| 9. |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 10. |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 11. |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 12. |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

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| **Lp.** | **Imię/imiona** | **Nazwisko** | **Nr ewidencyjny PESEL** | | | | | | | | | | | **Miejsce stałego zamieszkania** | | **Własnoręczny podpis** |
| **Miejscowość** | **Ulica/nr domu/nr lokalu** |
| 13. |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 14. |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 15. |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 16. |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 17. |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 18. |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 19. |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 20. |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 21. |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 22. |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 23. |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| 27. |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 28. |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

**Imię i nazwisko kandydata**: ………………………………………………………………………………………… **PESEL:** …………………………………………………

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| **Lp.** | **Imię/imiona** | **Nazwisko** | **Nr ewidencyjny PESEL** | | | | | | | | | | | **Miejsce stałego zamieszkania** | | **Własnoręczny podpis** |
| **Miejscowość** | **Ulica/nr domu/nr lokalu** |
| 29. |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 30. |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 31. |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 32. |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 33. |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 34. |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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**Imię i nazwisko kandydata**: ………………………………………………………………………………………… **PESEL:** …………………………………………………

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| **Lp.** | **Imię/imiona** | **Nazwisko** | **Nr ewidencyjny PESEL** | | | | | | | | | | | **Miejsce stałego zamieszkania** | | **Własnoręczny podpis** |
| **Miejscowość** | **Ulica/nr domu/nr lokalu** |
| 44. |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 45. |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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