Главе

Кусинского городского поселения

А.В. Чистякову

от \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(фамилия, имя и отчество)

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зарегистрированного(ой) по адресу: \_\_

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Тел: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Категория: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(работающий, безработный, пенсионер, инвалид и др.)

ЗАЯВЛЕНИЕ

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(подпись)

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(дата)