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Imię i Nazwisko Wnioskodawcy

Wypłatę dotyczącą szkolnego stypendium dla mojego dziecka /dzieci -

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w roku szkolnym \_\_\_\_\_\_\_\_\_\_\_\_\_\_ proszę przekazać na konto nr :

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którego właścicielem jest:

Imię nazwisko adres

Kalisz, dnia\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Czytelny podpis wnioskodawcy