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| **Załącznik nr 1**  Poznań dnia, ………………………………**FORMULARZ ZAMÓWIENIA PAPIERU KSERO**

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| **L.P.** | **Asortyment**  | **Ilość****Sztuki/opakowanie** | **UWAGI** |
| 1. |  |  |  |
| 2. |  |  |  |
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.   Imię i nazwisko, telefon osoby upoważnionej do obioru asortymentu:……………………………………………………………………………….Adres dostawy ( numer pokoju):  ………………………………………………………………………………. |