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| **Załącznik nr 1**  Poznań dnia, ………………………………  **FORMULARZ ZAMÓWIENIA PAPIERU KSERO**   |  |  |  |  | | --- | --- | --- | --- | | **L.P.** | **Asortyment** | **Ilość**  **Sztuki/opakowanie** | **UWAGI** | | 1. |  |  |  | | 2. |  |  |  | | 3. |  |  |  | | 4. |  |  |  | | 5. |  |  |  | | 6. |  |  |  | | 7. |  |  |  | | …. |  |  |  | | …. |  |  |  |   .      Imię i nazwisko, telefon osoby upoważnionej do obioru asortymentu:  ……………………………………………………………………………….  Adres dostawy ( numer pokoju):    ………………………………………………………………………………. |