

Karta osoby przyjętej do zakwaterowania

Imię i nazwisko*

PESEL*

W poniższych polach zakresi znakiem X dni, w których zapewniono zakwaterowanie i wyżywienie danej osobie*

DATA WYJAZDU DO POLSKI:

Rok 2022

Lipiec

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31
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Sierpień

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Wrzesień

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Październik

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Rok 2023

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Marzec

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Rok 2024

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Marzec

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Kwiecień

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Czerwiec

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Liczba dni łącznie*

Wypełnia Urząd – Liczba dni łącznie × dzienna wysokość świadczenia w zł

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* Pola oznaczone symbolem gwiazdki są wymagane.