**LISTA OBECNOŚCI**

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| Nazwa obiektu |  | | | | | | |
| Miesiąc/rok |  | | | | | | |
| Dzień m-ca | Imię i nazwisko | Imię i nazwisko | Imię i nazwisko | Imię i nazwisko | Imię i nazwisko | Podpis pracownika Zamawiającego | Uwagi | |
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