|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Lista osób popierających kandydata na ławnika (kadencja 2024-2027)** | | | | |
| …………………………………………………………………………………………………….………….Imię (imiona) i nazwisko kandydata | | | | |
| **L.p.** | **Imię (Imiona) i Nazwisko** | **PESEL** | **Własnoręczny podpis** | **Miejsce stałego zamieszkania** |
| **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 |  |  |  |  |
| 32 |  |  |  |  |
| 33 |  |  |  |  |
| 34 |  |  |  |  |
| 35 |  |  |  |  |
| 36 |  |  |  |  |
| 37 |  |  |  |  |
| 38 |  |  |  |  |
| 39 |  |  |  |  |
| 40 |  |  |  |  |
| 41 |  |  |  |  |
| 42 |  |  |  |  |
| 43 |  |  |  |  |
| 44 |  |  |  |  |
| 45 |  |  |  |  |
| 46 |  |  |  |  |
| 47 |  |  |  |  |
| 48 |  |  |  |  |
| 49 |  |  |  |  |
| 50 |  |  |  |  |
| **\* - pierwsza osoba wymieniona na liście jest uprawniona do składania wyjaśnień w sprawie zgłoszenia kandydata na ławnika** | | | | |