Директору МП «ЖКУ»

 Калашникову Е.Ю.

ФИО заявителя: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Адрес: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Тел.:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 E-mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Заявление

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«\_\_\_\_\_»\_\_\_\_\_\_\_\_\_\_\_\_\_2024г. Подпись\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_