



## LISTA OBECNOŚCI

### BEZROBOTNYCH ZATRUDNIONYCH W RAMACH PRAC INTERWENCYJNYCH

| m-c:<br>2023 rok |   |   |   |  |  |  | Podpis kierownika<br>kom. org. |
|------------------|---|---|---|--|--|--|--------------------------------|
|                  | 1 | 2 | 3 |  |  |  |                                |
| 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               |   |   |   |  |  |  |                                |

.....  
(podpis i pieczęć Pracodawcy lub osoby reprezentującej  
Pracodawcę)