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| Место для  машиночитаемого кода  **ЗАЯВЛЕНИЕ** | |
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Прошу включить меня в список избирателей на  года по месту нахождения в день голосования на избирательном участке №

Место нахождения

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| (код) | | (наименование субъекта Российской Федерации (наименование иностранного государства) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Фамилия | | | | | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |

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| Имя |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

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| Отчество |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

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| Дата рождения |  |  |  |  |  |  |  |  |  |  |  |
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Адрес места жительства (в соответствии с паспортом гражданина Российской Федерации)

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| (код) | | (наименование субъекта Российской Федерации) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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(муниципальный район)

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(населенный пункт)

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(улица (микрорайон)

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| (дом) | | | | | | (корпус (строение, владение) | | | | | | | (квартира (комната) | | | | | | (номер телефона) | | | | | | | | | | | |

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| Паспорт гражданина Российской Федерации  (в период замены паспорта – временное удостоверение личности) |  |  |  |  |  |  |  |  |  |  |
| (серия и номер) | | | | | | | | | |

Уведомлен(а) о том, что заявление о включении в список избирателей по месту нахождения может быть подано **только один раз**, а также о порядке аннулирования указанного заявления.

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|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | **МП (штампа)** |
| (число) | |  | (месяц) | |  | (год) | | | |  | (часы) | | (минуты) | | | | (подпись) |

**ОТРЫВНАЯ ЧАСТЬ ЗАЯВЛЕНИЯ О ГОЛОСОВАНИИ ПО МЕСТУ НАХОЖДЕНИЯ (передается избирателю)**

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Информацию об избирательном участке по месту нахождения можно получить по телефону +7 800 200 00 20   
или на сайте www.cikrf.ru в сети Интернет.

Заявление о голосовании по месту нахождения может быть подано **только один раз**.

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| **МП (штампа)** | № избирательного участка  по месту нахождения | |  |  |  |  | | --- | --- | --- | --- | |  |  |  |  | | Код субъекта Российской Федерации по месту нахождения | |  |  | | --- | --- | |  |  | |

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(фамилия, имя, отчество избирателя)

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(наименование субъекта Российской Федерации (наименование иностранного государства)

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(адрес помещения для голосования и номер телефона УИК по месту нахождения **(ВНИМАНИЕ: адрес помещения для голосования может быть изменен)**

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