**U G O V O R**

**zoper Informativni izračun za pravice iz javnih sredstev**

Prejemnik(-ca)/upravičenec(-ka) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (ime, priimek)

EMŠO \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_,

stanujoč-a \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(stalni naslov)

**vlagam** ugovor zoper informativni izračun

za otroški dodatek, subvencijo vrtca, subvencijo malice, subvencijo kosila (ustrezno obkroži),

ki ga je izdal Center za socialno delo \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_,

številka: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, z dne \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

zaradi:

1. **upoštevanja podatkov o osebah**

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1. **upoštevanja dohodkov**

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1. **upoštevanja premoženja**

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1. **drugo**

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1. **priloge:**

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Podpis:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Telefonska številka/elektronski naslov:

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V/Na \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ , dne \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_