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| **PODPISNI LIST AKTIVNO SODELUJOČIH** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
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| Ime in PRIIMEK aktivno sodelujoče/-ga: | | | | | | | | | | | | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| dan | | Kratek opis izvedenih aktivnosti | | | | | | | | | | | | | | | | | Lastnoročni podpis aktivno sodelujočega | | | | | | | | | | | | | | | št. ur prisotnosti | | | |  |
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| - | Obrazec izpolni odgovorna oseba izvajalca | | | | | | | | | | | | | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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