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 **( Prezime i ime )**

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 **( Adresa )
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 ( Telefon )
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 **( e- mail )**

#  OPĆINA DOBOJ ISTOK

1. *Općinska služba za društvene djelatnosti,*
2. *branilačko-invalidsku zaštitu i opću upravu*
3.

**PREDMET: Zahtjev za podnošenje pritužbi i prijedloga**

**Vrsta obraćanja: a) Prijedlog-preporuka b) Pritužba**

**Opis problema \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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**Način prijema odgovora:**

1. **Lično**
2. **poštom**

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 **( Mjesto i datum ) ( Potpis podnosioca zahtjeva )**