|  |
| --- |
| Zemgales reģiona kompetenču attīstības centra direktorei Sarmītei Vīksnai..........................................................................................................................................................*juridiskās pers. nosaukums / fiziskās pers. vārds uzvārds* .......................................................................................................................................................... *Reģistrācijas numurs /personas kods*  ..........................................................................................................................................................*juridiskā adrese, tālrunis / dzīves vieta, tālrunis* |

#

**iesniegums**

Lūdzam iznomāt ....................................................................................................................................................................

 (telpas nosaukums)

20........gada ........... . .................................... no plkst. .................... līdz ..........................

20......gada ........... . .................................... no plkst. .................... līdz ..........................

Pasākuma veids, nosaukums ..............................................................................................................................................

Pasākuma mērķis .......................................................................................................................................

Pasākuma mērķauditorija ...................................................................................................................................................

Plānotais dalībnieku skaits .................................................................................................................................................

Nepieciešamais tehniskais nodrošinājums ....................................................................................................................

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Nepieciešamais telpu iekārtojums ....................................................................................................................................

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### Rekvizīti rēķina izrakstīšanai .....................................................................................................................................................................................................

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Iesniegums iesniegts:

20........gada ........... . .................................... ...................................................................................................

*/pilnvarotās personas paraksts, atšifrējums/*