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ZAHTJEV

Za izdavanje jedinstvenog korisničkog identitete (AAI) u sustavu CARNET-a

Za osobu\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

OIB\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

RAZRED\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ADRESA\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

KONTAKT\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Potpis Datum

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