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| Nazwisko: |  |
| Imię: |  |
| Rok kształcenia: |  |

**Biuro ds. Pomocy Materialnej UW**

**w miejscu**

**Proszę o przekazywanie mojego stypendium na konto nr:**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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|  |
| Nazwa banku |  |

Data

czytelny podpis doktoranta