|  |
| --- |
| Приложение 2 |
|  |

**С П И С О К**

**неработающих пенсионеров** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (наименование организации)

|  |  |
| --- | --- |
| № п/п | Фамилия, имя, отчество |
|  |  |
|  |  |
|  |  |
|  |  |

Председатель совета ветеранов \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 ( наименование организации ) ( подпись )

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| « |  | » |  | 20 |  | г. |