| **Beneficjent:** | **…………………………………………….** |
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| **Nr projektu:** | **…………………………………………….** |
| **Tytuł projektu:** | **…………………………………………….** |

**Harmonogram wsparcia w ramach projektu**

| **Miejsce** |  | | |
| --- | --- | --- | --- |
| **Adres wsparcia** |  | | |
| **Rodzaj zajęć** |  | | |
| **Prowadzący** |  | | |
| **Liczba osób** |  | | |
| **Data** | **Godzina rozpoczęcia** | **Godzina zakończenia** | **Uwagi** |
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