Osnovna škola Petra Zrinskog

Krajiška 9, Zagreb

**POTVRDA**

**MDM tehničara o vraćenim tabletima**

Ime i prezime učenika: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Matični broj učenika: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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OIB učenika:

Opaska MDM tehničara:

Ovjera:

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(mjesto i datum)