****

**ŽUPANIJSKOM IZBORNOM POVJERENSTVU \_\_\_\_\_\_\_\_\_ ŽUPANIJE/ IZBORNOM POVJERENSTVU GRADA ZAGREBA**

ZAHTJEV ZA PROMATRANJE IZBORA PREDSTAVNIKA

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ NACIONALNE MANJINE *(naziv nacionalne manjine)*

U \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 2023.

*(naziv županije ili Grada Zagreba ili grada ili općine u kojoj se provode izbori)*

**KOJI PODNOSI UDRUGA NACIONALNE MANJINE**

**KOJA JE PREDLOŽILA KANDIDATURU**

**Naziv udruge nacionalne manjine:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Ime i prezime osobe ovlaštene za zastupanje udruge nacionalne manjine:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Adresa sjedišta:** |  | |  | |  |
|  | *(ulica i kućni broj)* |  | | *(grad i poštanski broj)* | |

**Broj telefona:**

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

**Osoba za kontakt:** **E-mail:**

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

*(ime i prezime) (broj telefona)*

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*ime i prezime i potpis ovlaštene osobe datum*

**UZ ZAHTJEV OBAVEZNO DOSTAVITI:**

1. **Popis promatrača**