**REQUERIMENTO CERTIDÃO DE INTEIRO TEOR PESSOA FÍSICA PARA FINS ELEITORAIS:**

**REQUERENTE:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**N. DA INSCRIÇÃO \_\_\_\_\_\_\_\_\_\_\_\_\_ RG: \_\_\_\_\_\_\_\_\_\_\_\_ ÓRGÃO EMISSOR\_\_\_\_\_\_\_\_\_CPF \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**TELEFONE: ( )\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ E-MAIL: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**EM NOME :­­­­­­­­­­­­­­­­­­ ­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­­­­\_\_\_\_\_\_\_\_\_N. DA INSCRIÇÃO \_\_\_\_\_\_\_\_\_\_**

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**Marque com um X a opção abaixo:**

**( ) Certidão de Inteiro Teor para Fins Eleitorais.**

**Encaminhar no e-mail:** **comissaoeleitoral@oabmt.org.br**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_\_/\_\_\_\_\_\_\_ /\_\_\_\_\_\_\_.**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ASSINATURA**

**EM NOME :­­­­­­­­­­­­­­­­­­ ­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­­­­\_\_\_\_\_\_\_\_\_N. DA INSCRIÇÃO \_\_\_\_\_\_\_\_\_\_**

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**O PRAZO PARA EMISSÃO DESTE DOCUMENTO É DE 3 (TRÊS) DIAS ÚTEIS APÓS VALIDAÇÃO DO PAGAMENTO,**

**EM CASO DE ENVIO POR CORREIO SERÁ COBRADO O VALOR DO REFERIDO ENVIO.**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_\_/\_\_\_\_\_\_\_ /\_\_\_\_\_\_\_.**

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