АДРЕС: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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 АКТ

 обследования материально-бытовых условий семьи

 от «\_\_\_\_» \_\_\_\_\_\_\_\_\_\_\_\_\_ 2019 г

Родители (Фамилия, имя, отчество, год рождения, место работы)

Мать \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Несовершеннолетние дети (год рождения, место учёбы, работы) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Жилая площадь (характеристика помещения, условия жизни, санитарное состояние помещения)

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Причина посещения семьи: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
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Выводы и предложения \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
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Члены комиссии:

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