AL DIRIGENTE SCOLASTICO DEL

LICEO ARTISTICO STATALE CARAVAGGIO

MILANO

**Oggetto: Ritiro documenti scolastici**

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Documento di riconoscimento:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ n°\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**DCICHIARA DI RITIRARE I SEGUENTI DOCUMENTI**

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Milano, \_\_/\_\_/\_\_\_\_

FIRMA

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