

INCARICHI CON ONERI A CARICO DELLA FINANZA PUBBLICA

alla data della presente dichiarazione, con indicazione del compenso stimato per l'anno in corso

Denominazione Incarico	Compenso annuo
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ASSOCIAZIONI CUI SI È ISCRITTI (facoltativo)

Denominazione	Dal	al
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Data 31 ottobre 2024

Firma del/della dichiarante

Firmato digitalmente