Начальнику ФГБУ «Камчатское УГМС» Поляковой В.С.

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(Ф.И.О.)

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(Ф.И.О., наименование должности работника, телефон)

**уведомление**

работодателя (его представителя) работниками,

о возникшем конфликте интересов или о возможности его возникновения

1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(описание обстоятельств, которые привели или могут привести к возникновению конфликта интересов.)

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"\_\_" \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 20\_\_ г. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(подпись, фамилии и инициалы)