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| *Znak sprawy:* | | | |  | | | | | | |  | | | | | **K-03/W/167** |
|  | | | | **LISTA KONTROLNA DO**  **RAPORTU Z CZYNNOŚCI KONTROLNYCH**  **PROGRAM ROZWOJU OBSZARÓW WIEJSKICH NA LATA 2007-2013**  **WIZYTACJA W MIEJSCU** | | | | | | | | | | | | |
|  | | | | | |  | | | | | | | | |  | |
| **Nr Raportu z czynności kontrolnych** | | | | | | | | | **Z dnia** | | | | | | | | |
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| **Oś** | | |  | | | | | | | | | | | | **Wniosek o płatność** | |
| **Działanie** | | |  | | | | | | | | | | | |
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| **Lp.** | **Przedmiot weryfikacji** | | | | **Dane podmiotu kontrolowanego** | | | | | **Ocena zgodności ze stanem faktycznym** | | | | **Uwagi kontrolujących** | | |
| **Jedn. miary** | | **Ilość** | | | **TAK** | | **NIE** | **ND** |
| **I. WERYFIKACJA REALIZACJI OPERACJI.** | | | | | | | | | | | | | | | | |
|  | Zgodność lokalizacji operacji. | | | |  | | | | |  | |  |  |  | | |
|  | Zgodność zestawienia rzeczowo-finansowego z zakresem realizacji operacji. | | | | | | | | | | | | | | | |
| I. | Koszty operacji. | | | | | | | | | | | | | | |
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| II. | Koszty ogólne. | | | | | | | | | | | | | | |
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| **Uwagi kontrolujących:** | | | | | | | | | | | | | | | | |
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