



FONDAZIONE ONLUS
CASA DI RIPOSO BEATA CRISTINA

REGISTRO DEGLI ACCESSI CIVICI

II° semestre anno 2019

N.	Data Presentazione Domanda	Oggetto della Domanda	Esito Istruttoria	Data Evazione Domanda
1	---	---	---	---
2	---	---	---	---
3	---	---	---	---
4	---	---	---	---
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6	---	---	---	---

Il Presidente
(Giovanni Appiani)

