**Röstlängd vid årsmöte   
- lokal hyresgästförening (LH)**

Datum: ……………………………

Den lokala Hyresgästföreningen…………………………………………………………….

Hyresgästförening…………………………………………………………………………

Röstberättigade (ange namn och adress samt H=huvudmedlem/F=familjemedlem)

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Deltagare (ange namn och adress)

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