**Në bazë tëLigjit Nr. 119/2014 “Për të Drejtën e Informimit”**

**Emri / Mbiemri[[1]](#footnote-1) :**

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**Qyteti: Elbasan**

Përshkruani çdo veprim të pretenduar si shkelje nga Këshilli i Qarkut Elbasan dhe nëse dispononi dokumente bashkëlidhini ato.

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Përshkruani çfarë kërkoni nga Institucioni i Këshillit të Qarkut Elbasan, në përputhje me nenin 24 të ligjit nr.119/2014.

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 (Data) **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

(Firma) **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

1. Në rastet kur informacioni i kërkuar përmban të dhëna personale, kërkohet dokumenti i identifikimit të kërkuesit. [↑](#footnote-ref-1)