|  |  |  |
| --- | --- | --- |
| 01_2 kolor srednji | Crna Gora  Opština Kotor  Sekretarijat za opštu upravu | Stari grad 317  85330 Kotor, Crna Gora  tel. +382(0)32 325 020  fax. +382(0)32 325 020  opsta.uprava@kotor.me [www.kotor.me](http://www.kotor.me) |

Broj: 0205-019/2\_ - Kotor, \_\_\_\_\_\_\_\_\_\_\_\_.godine.

**Predmet: Zahtjev za izdavanje izvoda iz matičnog registra vjenčanih**

|  |  |
| --- | --- |
| **PODACI ZA SUPRUGA** | **PODACI ZA SUPRUGU** |
| **Ime** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **Prezime** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **Datum rođenja** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_    **Mjesto rođenja** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **Ime oca** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **Ime majke**  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **JMB** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | **Ime** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **Prezime** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **Datum rođenja** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **Mjesto rođenja** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **Ime oca** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **Ime majke**  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **JMB** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

Brak smo sklopili \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(dan,mjesec i godina) u \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(mjesto, opština, država)

Izvod mi je potreban radi \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Izvod se izdaje na osnovu punomoćja broj :\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ izdatog dana \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

U prilogu podnosim dokaz o uplati administrativne takse u iznosu od \_\_\_\_\_\_\_\_\_ eura, na \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ na žiro račun Opštine Kotor.

(običnom/internacionalnom obrascu)

**PODNOSILAC/TELJKA ZAHTJEVA** (POTPIS OVLAŠĆENOG LICA)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ M.P. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_