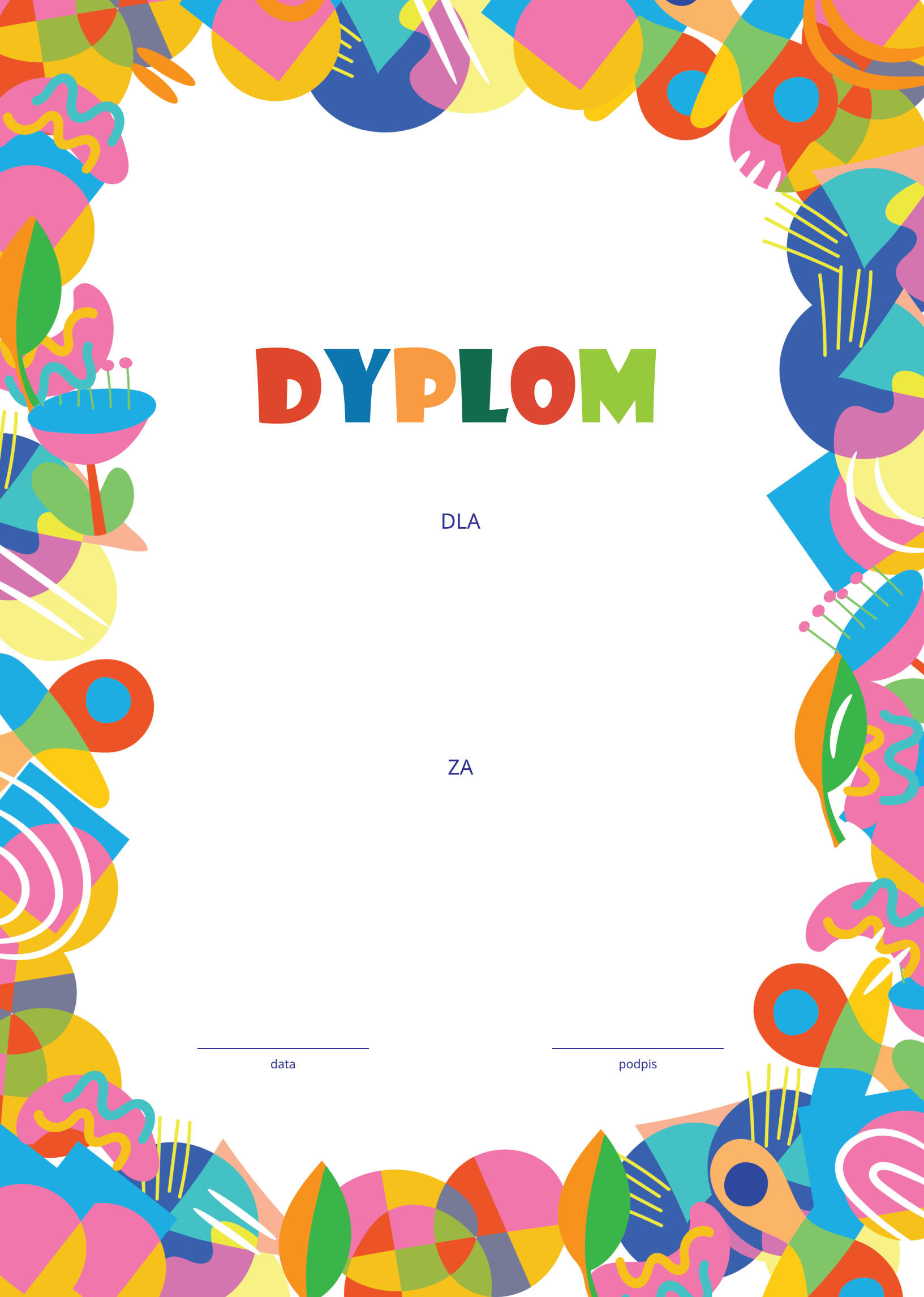




DYPLOM

DLA

ZA

data

podpis