**ANEXO X**

**EDITAL DE SUBSÍDIO MENSAL PARA ESPAÇOS E INSTITUIÇÕES CULTURAIS**

**FORMULÁRIO DE RECURSO**

**ESPAÇO CULTURAL INFORMAL (SEM CNPJ)**

(Preenchimento exclusivo para espaços culturais informais)

**NOME DO PROPONENTE:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**NOME DO REPRESENTANTE:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 **CPF:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**INSTITUIÇÃO CULTURAL (ESPAÇOS E EMPRESAS CULTURAIS COM CNPJ)**

(Preenchimento exclusivo para espaços e empresas culturais com CNPJ)

**RAZÃO SOCIAL:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**CNPJ:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**NOME DO REPRESENTANTE:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**MOTIVO PARA O RECURSO**

(O proponente deve escrever abaixo seus/suas questionamentos/respostas)

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Nova Iguaçu, \_\_\_\_\_\_ de \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ de 2020

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Assinatura do proponente