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|  |  |  | CAMARA DE INDUSTRIA COMERCIO y SERVICIOS ARGENTINO - CALIFORNIANA | | |  |
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|  |  |  | *Vuelta de Obligado 1122 Piso 7° Of. 31 CABA - CP 1426* | | |  |
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|  | *FORMULARIO DE ASOCIACIÓN* | | | | |  |
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|  | **Nombre de la Empresa** |  | | | |  |
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|  | **Rubro u Actividad** |  |  |  |  |  |
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|  | **CUIT N°** |  | | | |  |
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|  | **Persona de Contacto** |  | | | |  |
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|  | **Dirección** | ***Calle*** | **N°** | **Localidad** | **C.Postal** |  |
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|  | **Provincia** |  | | | |  |
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|  | **Teléfonos de Contacto** |  | | | |  |
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|  | *Firma* |  |  |  |  |  |
|  | *Aclaración y Cargo* |  |  |  |  |  |
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