**AUTO ESCOLA NOME**

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 **SAE: 0000 Banca:**

 **Data do Exame: XX/06/2017**

**Agendamento Exame Prático**

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| --- | --- | --- | --- | --- |
|  | **Candidato(a)** | **CPF** | **CAT** | **Renach** |
| 1 | José da Silva | 123.456.789.00 | A | 123456258 |
| 2 | Maria dos Santos | 123.456.789-00 | B | 123456789 |
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**Uso do Detran.SP**

**Recebido por: Data:**

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**Nome**