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| **Fecha y lugar:** |  |
| **Nombre de la organización:** |  |
| **Municipio:** |  |
| **Responsable de la asamblea:** |  |

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| **No. Consecutivo**  | **Clave de elector (1)**  | **Sección Electoral (2)** | **Nombre(s) (3)** | **Apellido Paterno (4)** | **Apellido Materno (4)** | **Domicilio (5)** |
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| **Total de afiliados (6)** |
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