

**DATE CONTACT FURNIZORI DE INGRIJIRI MEDICALE LA DOMICILIU/PALIATIVE LA DOMICILIU 2016**

| <b>Nr. Crt.</b> | <b>Nr. Contract</b> | <b>Denumire Furnizor</b>                | <b>Reprezentant Legal</b>      | <b>Nr. Telefon</b>  | <b>Adrese e-mail</b>   |
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