

**FORMULÁRIO - SUBMISSÃO DE MOÇÕES**

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| **Data:** \_\_\_\_/\_\_\_\_\_/2019  **Tipo de Moção:**   1. ( ) Moção de Apoio 2. ( ) Moção de Proposição 3. ( ) Moção de Repúdio 4. ( ) Moção de Denúncia   **Esfera de atuação do destinatário da Moção**:   1. ( ) Governo Federal 2. ( ) Governo Estadual 3. ( ) Governo Municipal 4. ( ) Sociedade Civil 5. ( ) Judiciário 6. ( ) Legislativo 7. ( ) Outros \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ *(escrever)*   **Proponente responsável:**   1. ( ) Pessoa Física 2. ( ) Coletivo/ Associação de imigrantes 3. ( ) Organização de apoio a imigrantes   Nome da organização: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Nome da pessoa: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Se for pessoa física, indicar nacionalidade: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **Assunto da moção:**  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

**Texto da moção:**

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