**Hilfsnetz Pfarrei Sankt Katharina von Siena Frankfurt **

**Gemeinde:**

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| **Name + Adresse** | **Telefon** | **Datum Anruf** | **Art der erfragten Hilfeleistung/Zeitraum** | **Name des Helfers****(v. Organisator einzutragen)** | **Erledigt am** |
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