



Verwaltung/Gäste

Name

Einrichtung

Unterschrift

Wagner A.

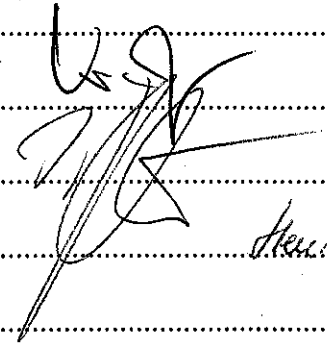
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Dr. Gollmann

V. J.

Heinrich

Eb K Gm



Heinrich