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| 附件2: | | | | | | | | | |  |
| **奉化区企业人才生活津贴补助汇总表** | | | | | | | | | | |
| 填报单位（盖章）： 单位负责人（签名）： 填报时间： 填报人： 联系电话： | | | | | | | | | | |
| 序号 | 姓名 | 性别 | 身份证号码 | 学历  学位 | 毕业学校 | 职称等级 | 补贴起止日期 | 申领  金额 | 开户行 | 银行卡号 |
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| 合计 | | | | | | | |  | | |
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