**岳西县就业困难人员灵活就业社保补贴申报汇总表（公示表）**

（公示时间： 年 月 日— 月 日）

乡镇（社区）公章： 填报日期：

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| 姓名 | 身份证号码 | 性别 | 补贴类型 | 养老补贴月数 | 养老补贴金额 | 医疗补贴月数 | 医疗补贴金额 | 合计 | 联系电话 |
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复核人： 经办人：