附件2

 企业带动就业人员增加补贴申请表

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| 序号 | 姓名 | 身份证号码 | 联系电话 | 社保账号 | 工商注册日期 | 社保缴费月份 | 申请补贴月份 | 补贴金额 | 备注 |
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| 合计 |  |  |  |  |  |  |  |  |  |

填报单位（盖章）：填报日期：年月日