附件2

泉州市中小微企业一次性吸纳就业补贴花名册

单位名称：（盖章） 年 月 日

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| **序号** | **姓名** | **身份证号** | **毕业**  **时间** | **毕业**  **院校** | **学历** | **生源地** | **联系**  **电话** | **劳动合同**  **起止时间** | **企业职工基本养老保险、失业保险缴纳时间** |
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