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| 附件4 |  |  |  |  |  |  |  |  |  |  |
| 碧江区申报惠民殡葬服务补助(减免)人员名册、结算汇总表 |
| 申报部门： |  |  |  |  |  |  | 时 间： |  年 月 日 |
| **逝者****姓名** | **性别** | **身份证号码** | **户籍所在地** | **死亡日期** | **安葬地点** | **安葬****方式** | **是/否有补助(元)** | **减免项目** | **实际金额(元)** | **减免金额(元)** | **小 计** |
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| 合计 |  |  |  |
| 总 计：共计： 页 具遗体 实际费用为 元 共为 户 群众补助(减免)费用为 元 本页为第 页经办人： 审核人： 审批人：  |