附件3

用人单位一次性新增就业补贴人员花名册

单位名称（盖章）： 2022年 月 日 统一社会信用代码：

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| 序号 | 姓名 | 性别 | 本单位  就业时间 | 岗位 | 合同期限 | 月均收入 | 户籍地 | 联系方式 | 备注 |
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