附件2：

西安市户籍特色文创项目残疾人汇总表

 单位名称（盖章）:

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| --- | --- | --- | --- | --- | --- | --- |
| 序号 | 姓名 | 性别 | 联系方式 | 残疾证号 | 从事文创产品类别 | 月均工资(或增收额) |
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填表人： 填表日期： 年 月 日