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| 浦城县乡村教师生活补助情况表 | | | | | | | | | | |
| 填报单位： | | | | 校长签名： | | 填表人： | |  | 年  月  日 | |
| 序  号 | 姓名 | 性  别 | 身份证号 | 任教学校 | 学校地址 | 月补助金额 | 实际补助月数 | 年补助金额 | 实施时间 | 备注 |
| 1 |  |  |  |  |  |  |  |  |  |  |
| 2 |  |  |  |  |  |  |  |  |  |  |
| 3 |  |  |  |  |  |  |  |  |  |  |
| 4 |  |  |  |  |  |  |  |  |  |  |
| 5 |  |  |  |  |  |  |  |  |  |  |
| 6 |  |  |  |  |  |  |  |  |  |  |
| 7 |  |  |  |  |  |  |  |  |  |  |
| 8 |  |  |  |  |  |  |  |  |  |  |
| 9 |  |  |  |  |  |  |  |  |  |  |
| 10 |  |  |  |  |  |  |  |  |  |  |