附件

\_\_\_\_\_\_年度失业保险支持稳定岗位补贴企业名单

审核单位（盖章）：

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| **序号** | **企业名称** | **企业类型** | **年末参保人数** | **年度缴费金额（元）** | **裁员率%** | **补贴金额（元）** | **备注** |
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**注：**企业类型按照大型、中小微、30人以下三种情况填写。