**附件2:** **伊金霍洛旗2024年耕地地力保护补贴项目无膜种植面积补贴资金发放花名册**

镇 村 社 单位：亩、元

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| **序号** | **户主** | **身份证号** | **一卡通(一折通)号** | **无膜补贴面积** | **补贴标准** | **补贴金额** | **联系电话** | **签字** |
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| 合计 |  |  |  |  |  |  |  |  |