附件1

 **经办机构慰问金发放登记簿**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **序号** | **姓名** | **身份证号** | **参加计划** | **慰问金额（元）** | **联系电话** | **领款日期** | **备注** |
| **1** |  |  |  |  |  |  |  |
| **2** |  |  |  |  |  |  |  |
| **3** |  |  |  |  |  |  |  |
| **4** |  |  |  |  |  |  |  |
| **5** |  |  |  |  |  |  |  |
| **6** |  |  |  |  |  |  |  |
| **7** |  |  |  |  |  |  |  |
| **8** |  |  |  |  |  |  |  |
| **合计** |  **大写金额： 元整** |

**经办机构负责人签字： 审核人： 经手人：**

附件2

 **慰问金发放签收单**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **姓名** |  | **身份证号** |  | **参加计划** |  | **金 额** |  |
| **会员本人签名** |  | **签收时间** |  | **联系电话** |  |
| **代领人****签名** |  | **代领人身份证** |  | **签收时间** |  |
| **代领人与会员的关系** |  | **联系电话** |  |
| **经办人 签名** |  |

**注：**本表由经办机构签发，经办人签名后留经办机构登记备查（附情况说明）