附件2

2018年劳模休养名单汇总表

填报单位： 休养批次： 填报时间： 年 月 日

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| 序号 | 姓名 | 性别 | 年龄 | 民族 | 单位及职务 | 所获荣誉及时间 | 身份证号码 | 手机号码 |
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