附件5

劳动争议调解办案补贴发放情况汇总表

填报单位： 填报时间： 年 月 日

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| 序号 | 调解员姓名 | 卷宗名称 | 案件编号 | 所在调解组织名称 | 调解员证编号 | 案件类型 | 补贴金额 | 补贴发放时间 | 银行账号 | 开户银行 | 身份证号 | 手机号码 | 备注 |
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填报人： 审核人： 审核领导：