附件3

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| **大冶市城乡老年人日间照料活动中心运营补贴申报表** | | | | |
| **乡镇（场）民政办（盖章）： 申报时间：** | | | | |
| 序号 | 城乡老年人日间照料活动中心名称 | 运营情况 | | 申报运营补贴资金 |
| 合格 | 优秀 |
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