附件7

**南阳市特殊困难老年人家庭适老化改造项目花名册**

单位（公章）： 填报时间：

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| --- | --- | --- | --- | --- | --- |
| **序 号** | **姓 名** | **身份证号** | **家庭地址** | **联系方式** | **改造费用/元** |
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