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| **项目专家咨询费发放表（转卡）** | | | | | | | | | | | |
| **单位（公章）：** | | | | |  |  |  | | | **年 月 日** | |
| **姓名** | **工作单位** | | **职称** | **身份证号码** | **应发额（元）** | **扣税（元）** | | **实发额（元）** | **卡号（ 银行）** | | **领款人 签字** |
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| **咨询内容：** |  | | | | | | **咨询方式：** | | | 会议/现场访谈/通讯 | |
| **合 计：** | | **（大写） 拾 万 仟 佰 拾 元** | | | | | **（小写）：** | | | | |
| **校领导：** |  | | **部门负责人：** | | **财务审核：** | |  | | | **制单： 项目负责人：** | |
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| **项目专家咨询费发放表（转卡）** | | | | | | | | | | | |
| **单位（公章）：** | | | | |  |  |  | | | **年 月 日** | |
| **姓名** | **工作单位** | | **职称** | **身份证号码** | **应发额（元）** | **扣税（元）** | | **实发额（元）** | **卡号（ 银行）** | | **领款人 签字** |
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| **咨询内容：** |  | | | | | | **咨询方式：** | | | 会议/现场访谈/通讯 | |
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| **校领导：** |  | | **部门负责人：** | | **财务审核：** | |  | | | **制单： 项目负责人：** | |