**附件2**

**公疗报销材料接收核对登记表** 第（ ）页

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| **序号** | **姓名** | **报销号（学号或工号）** | **上交收据数量（张）** | **所交收据票面总额（元）** | **交单人签字** | **收单人签字** | **交单日期** | **备注** |
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