附表1

新乡县\_\_\_\_乡（镇）\_\_\_\_村贫困户（边缘户）化肥奖补申请表

填表日期：

|  |  |  |  |
| --- | --- | --- | --- |
| **户主姓名** |  | **身份证号** |  |
| **人口数** |  | **银行账号** |  |
| **自种耕地面积 （亩）** |  | **联系电话** |  |
| **申请奖补化肥 （袋）** |  | | |
| **农户签字**  **按指印** | **我承诺自种耕地 亩，购买奖补化肥 袋，若购买化肥超出自种耕地所需的部分由本人全额承担。**  **签名（按指印）：** | | |
| **村委会意见** | **年 月 日（签章）** | | |

申报说明：农户根据自种耕地亩数进行申报，原则上每亩申请1袋（40公斤），耕地亩数不足1亩的可申请1袋；1亩以上且不为整数的可申请（整数部分+1）袋。

附表2

新乡县\_\_\_\_乡（镇）\_\_\_\_村拟扶持户名册

登记表

**签字盖章（村委会）： 日期：**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **序号** | **户主姓名** | **身份证号** | **银行账号** | **自种耕地面积（亩）** | **申请奖补化肥（袋）** |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

附表3

新乡县\_\_\_\_乡（镇）拟扶持户名册汇总表

**签字盖章（乡、镇政府）： 日期：**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **序号** | **村庄名称** | **户数** | **自种耕地面积 （亩）** | **申请奖补化肥 （袋）** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

附表4

新乡县\_\_\_\_乡（镇）扶持户化肥购买登记表

**签字盖章（乡、镇政府）： 日期：**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **序号** | **村庄名称** | **姓 名** | **身份证号** | **自种耕地面积 （亩）** | **购买化肥 （袋）** | **总价 （元）** |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |