附件3

园区（基地）申报实施养老保险过渡费率试点企业名册

园区（基地）盖章：

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| 序号 | 企业名称 | 所有制性质 | 在职人数 | 参保人数 | 月单位缴费基数总额 | 月人均缴费基数 | 社会保险编码 | 现单位缴费费率 | 拟实施试点费率 |
| 1 |  |  |  |  |  |  |  |  |  |
| 2 |  |  |  |  |  |  |  |  |  |
| 3 |  |  |  |  |  |  |  |  |  |
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