附件2

“小善举 ·大爱心”慈善捐款登记表

单位名称： 联系人： 电话：

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| --- | --- | --- | --- |
| **序号** | **捐款人姓名** | **捐款金额（元）** | **备 注** |
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| **合 计** | |  |  |