附件1

会计人员继续教育培训报名表

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **序号** | **姓名** | **性别** | **身份证****号码** | **工作单位** | **一级主管单位** | **职务** | **职称** | **联系电话** | **参加期次** | **备注** |
| 1 |  |  |  |  |  |  |  |  |  |  |
| 2 |  |  |  |  |  |  |  |  |  |  |
| 3 |  |  |  |  |  |  |  |  |  |  |
| 4 |  |  |  |  |  |  |  |  |  |  |
| 5 |  |  |  |  |  |  |  |  |  |  |
| 6 |  |  |  |  |  |  |  |  |  |  |
| 7 |  |  |  |  |  |  |  |  |  |  |
| 8 |  |  |  |  |  |  |  |  |  |  |

附件2

|  |
| --- |
| **发 票 信 息** |
| 发票类型 | 普通发票（ ） 专用发票（ ） |
| 发票抬头 |  |
| 纳税人识别号（统一社会信用代码） |  |
| 单位地址、电话（专票必填项） |  |
| 开户行及账号（专票必填项） |  |
| 发票内容 | 培训费（ ） |

发票信息