附件3

养老服务领域诈骗风险隐患“红橙黄”风险管控名单

 填报单位（盖章）：

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| 序号 | 养老服务机构及服务场所名称 | 类别 | 风险隐患点 | 风险隐患等级 | 整治措施 | 是否立案 | 立案时间 | 摸排单位 | 备注 |
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主要负责人： 分管负责人： 填报人： 联系电话（手机）：