附件4

**2025年（ ）月份承担发放任务的畜牧总站优质肉牛补贴冻精**

**接收发放情况表**

畜牧总站名称（章）： 填表日期：

|  |  |  |  |  |  |  |  |  |  |  |
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| **种公牛站名称** | **接收情况** | | | | | | **发放情况** | | | |
| **接收时间** | **接收**  **种公牛号** | **接收数量**  **（剂）** | **价格**  **（元/剂）** | **总价**  **（元）** | **剩余资金（元）** | **发放时间** | **发放种公牛号** | **发放数量**  **（剂）** | **库存数量（剂）** |
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注：本表由承担发放任务的畜牧总站于每月汇总时填写。

【 页/总 数】