政府信息公开申请表

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 提交部门: | | | | | | 申请时间: 年 月 日 | | | | | | | |
| 依申请公开标题 | | |  | | | | | | | | | | |
| 申请人姓名 | | |  | | | | 申请人手机号码 | | | |  | |
| 申请人信息 | | 公民 | 工作单位 |  | | | | | | 证件名称 |  | | |
| 证件号码 |  | | | | | | 传真 |  | | |
| 邮政编码 |  | | | | | | 电子邮箱 |  | | |
| 联系地址 |  | | | | | | | | | |
| 单位或组织 | 单位名称 |  | | | | | 机构代码 | | - | | |
| 营业执照 |  | | | | | 法人代表 | |  | | |
| 联系人 |  | | | | | 手机号 | |  | | |
| 传真 |  | | | | | 电子邮箱 | |  | | |
| 联系地址 |  | | | | | | | | | |
| 所需信息情况 | 所需信息的内容描述 | |  | | | | | | | | | | |
| 选填部分 | | | | | | | | | | | | |
| 所需信息的信息索引号 | |  | | | | | 信息获取方式 | | | |  | |
|  | |  | | | | |  | | | | | |
| 附件 | 申请材料 | |  | |  | | | | | | | | |