附件1

北京市全国残疾人基本服务状况和需求专项调查底册

**单位：** **区（县）**  **街道（乡镇）** **社区（村）**

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| 序号 | 姓名 | 性别 | 年龄 | 残疾类别 | 残疾  等级 | 住址 | 电话 | **备 注** | | | | | | |
| 完成调查 | | 未完成调查 | | | | |
| 入户  调查 | 电话  调查 | 查无  此人 | 已搬迁 | 空挂户 | 外出 | 死亡 |
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说明：“备注”栏由调查员入户时填写