附件4

山东省中小微企业升级高新技术企业财政补助资金推荐汇总表（孵化载体类）**所在市科技局：（盖章）**

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **序号** | **孵化载体名称** | **运营单位名称** | **孵化载体类型（科技企业孵化器、众创空间）** | **省级/国家级** | **所在市** | **2020年度培育的高新技术企业情况** | | | | **申请省奖励金额（万元）** |
| 企业名称 | 成立时间 | 入驻时间 | 企业地址 |
| **1** |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |
| ... |  |  |  |
| **2** |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |
|  |  |  |  |
| **3** |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |
| ... |  |  |  |
| **4** |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |
| ... |  |  |  |