附件4：

填报单位: (盖章)

# 需要回退监测对象明细表

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **序号** | **乡** | **村** | **户主姓名** | **身份证号** | **家庭人口数** | **监测对象类型** | **回退原因** | **备注** |
| 1 |  |  |  |  |  |  |  |  |
| 2 |  |  |  |  |  |  |  |  |
| 3 |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
| ... |  |  |  |  |  |  |  |  |

**填表说明:**“回退原因”从以下5种原因中选取(可多选),表中填报序号。

1.落实帮扶措施针对性不强,成效不明显;

2.“两不愁三保障”及饮水安全未稳定解决;

3.收入未持续稳定,家庭人均纯收入稳定未超出收入监测范围;

4.大额刚性支出问题未稳定解决。

5.已消除风险监测对象中整户无劳动力。