**宣贯预报名表**

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| 单位名称： | | | | | | |
| 地 址： | | | | | | |
| 联系人 |  | | | 联系电话 |  | |
| 参加人姓名 | | 性 别 | 职 务 | | 联系电话 | 备注 |
|  | |  |  | |  | 请将此表发送至sxrqpx@163.com |
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