附 件

参会人员回执

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| 序号 | 姓名 | 单位 | 职务 | 电话 | 备注 |
|  |  |  |  |  | 主管局领导 |
|  |  |  |  |  | 科室负责人 |
|  |  |  |  |  | 教研员 |
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| 合计 |  | | | | |