**附件：**

**参会人员报名回执表（请填写完整）**

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| 企业开票信息 | |
| 名 称 |  |
| 纳税人识别号 |  |
| 地址：电话 |  |
| 开户行及账号 |  |

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| 单位名称 |  | | | | |
| 通讯地址 |  | | | | |
| 联系人 |  | | 电话 | |  |
| 姓 名 | | 职 务 | | 手机号 | |
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