附件

会议回执

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| 序号 | 姓 名 | 性别 | 单 位 | 职务/  职称 | 联系电话 | 5日午餐 | | 5日晚餐 | |
| 是 | 否 | 是 | 否 |
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注：请参会人员在就餐栏内选择打“√”。