附件2

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| 推荐专家汇总表 | | | | | | | | | | |
| 推荐单位： （公章） 填表时间： | | | | | | | | | | |
| 序号 | 姓名 | 性别 | 工作单位 | 身份证号码 | 专业领域 | 职称 | 职务 | 办公电话 | 移动电话 | 备注 |
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