**附件：赴西柏坡专题培训活动报名回执表**

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| **开具发票的单位抬头名称：** | | | | | | | |
| **填表联系人：** | | | | | **联系电话：** | | |
| **纳税人识别号：** | | | | | **电子发票接收邮箱：** | | |
| **序号** | **姓名** | **职务** | **手机** | **身份证号码** | | **房型**  **（单/双）** | **备 注** |
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