附件2

[区县参培回执汇总表](http://www.cqjy.com/Upload/main/ContentManage/Article/File/2021/09/18/202109181453183122.docx)

**区县： 填报人： 联系电话：**

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| **姓名** | **性别** | **单位** | **职务** | **联系电话** | **住宿****（是/否）** | **18晚餐****（是/否）** |
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