附件2

标准化及监督检查“一体化”工作会议签到表

企业名称：

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| 会议  时间 |  | 会议  地点 |  | | | 主持人 | |  |
| 会议  名称 |  | | | | | | | |
| 参会专家 | | | | | | | | |
| 姓名 | 工作单位 | | | 职称 | 职务 | | 联系电话 | |
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| 参会人员 | | | | | | | | |
| 姓名 | 工作单位 | | | 职称 | 职务 | | 联系电话 | |
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| 姓名 | 工作单位 | 职称 | 职务 | 联系电话 |
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