附件2

省级以下测试机构（站点）负责人报名表

**填报单位： 联系人及电话:**

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| 序号 | 姓名 | 单位及职务职称 | 手机号 |
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注：此表可加页。手机号用于会场登录，请务必填写并仔细核对。请发送电子版至383208007@qq.com。