附件2：

参会人员回执

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| 单位名称 | |  | | | | | | | | |
| 报名联系人 | |  | | | 电话 |  | 邮箱 | | |  |
| 参加人员姓名 | | | | 性别 | 职务 | | | 手机 | | |
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| **开票信息** | | | | | | | | | | |
| 开票类型 | 🞎增值税专用发票（纸质） 如选择此项，请补充以下信息：  专票邮寄地址： | | | | | | | | | |
| 🞎增值税普通发票（电子） 如选择此项，请补充以下：  电子邮箱： | | | | | | | | | |
| \*收件人/联系人： 电话： | | | | | | | | | |
| 开票单位名称 | | |  | | | | | | | |
| 纳税人识别号 | | |  | | | 电话 | | |  | |
| 地址 | | |  | | | | | | | |
| 开户行 | | |  | | | 银行账号 | | |  | |

邮箱：[259549945@qq.com](mailto:259549945@qq.com)