附件1

**参会回执**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **序号** | **单位名称** | **联系人姓名** | **职务** | **手机** |
| 1 |  |  |  |  |
| 2 |  |  |  |  |
| 3 |  |  |  |  |
| 4 |  |  |  |  |