附件3

山东科技咨询协会  
第七次会员代表大会会员代表推荐表

推荐单位（盖章）：

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| 序号 | 姓名 | 性别 | 出生年月 | 工作单位 | 职务/职称 | 通讯地址 | 电子邮箱 | 手机号 |
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