深圳市第三人民医院交流会报名表

招标项目：口罩机、塑料袋自助机、共享充电宝引进项目 年 月 日

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| **序号** | **报名单位** | **法人代表** | **报名人** | **联系电话** | **邮箱** | **备注** |
| 1 | xxx公司 | xxx | xxx | xxx | xxx | 口罩机 |
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