附件

2020年济南市会计领军人才选拔培养

报名汇总表

上报单位（盖章）： 日期： 年 月 日

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| 序号 | 姓名 | 性　别 | 所在单位 | 职　务 | 职　称 | 学 历 | 联系电话 |
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