附件2

**代表回执**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 姓名 | 企业或单位名称 | 生产或检测主要产品 | 性别 | 民族 | 职务/职称 | 联系电话 | 住宿要求  (标间、单间) | 预计报到时间 |
|  |  |  |  |  |  |  |  |  |
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| 备注 |  | | | | | | | |