**中美智慧教育大会参会回执表**

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| 单位名称 | |  | | | |
| 通信地址 | |  | | | |
| **发票抬头** | |  | | | |
| **发票税号** | |  | | | |
| 序号 | 姓名 | 性别 | 部门及职务 | 手机号码（必填） | 电子邮箱 |
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