附件：

**2020年全省秸秆机械化还田和农机深松作业技术及补助操作培训班报名回执**

报名单位：市农业农村局

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| **序号** | **姓名** | **性别** | **单位** | **职务/职称** | **联系电话** |
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| **领队：** | |  | | | |

填报单位： 填报人： 联系电话：