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| **附件2 委托徐州市建设监理协会培训监理从业人员汇总表（监理员）** | | | | | | | | | |
| **单位名称（盖章）： 单位联系人： 联系电话： 日期： 年 月 日** | | | | | | | | | |
| 序号 | 姓名 | 性别 | 学历 | 所学专业 | 职称 | 出生年月 | 身份证号 | 联系电话 | 备注 |
| 1 |  |  |  |  |  |  |  |  |  |
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