附件3

**昆明市交通运输局安全生产暨应急处置专家**

**入库申请名单汇总表**

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| 序号 | 姓名 | 性别 | 工作单位 | 申请专家类别 | 联系方式 | 备注 |
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备注：请在备注栏填写是否为第一届专家咨询委员会成员

填报单位： 填表人： 联系电话：