**附件：**

**2020年电力创新奖成果和质量管理成果申报培训班回执**

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| --- | --- | --- | --- | --- | --- | --- |
| **单位名称及电话** | **参加人员**  **姓名** | **手机号码** | | **身份证号码** | **住宿情况** | |
| 单间 | 标间 |
| 单位名称：  单位联系人姓名及电话： |  |  | |  |  |  |
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| **开票信息** | | | | | | |
| **单位名称** | | | **纳税人识别号** | | | |
|  | | |  | | | |
| **地址** | | | **电话** | | | |
|  | | |  | | | |
| **开户银行** | | | **账号** | | | |
|  | | |  | | | |

备注：请将回执表、转账凭证报送至邮箱：[ahdlhyxhzc@163.c](mailto:ahdlhyxhzc@163.com)om