附件1

彝良县2025 年“会聚良缘 七夕有你”活动报名表

填报单位：

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 姓名 | 性别 | 年龄 | 单位 | 电话 | 备注 |
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填报人： 电话：

附件2

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