附件4

**安徽省职业安全健康协会第六次个人会员登记汇总表**

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| 姓 名 | 性别 | 出生年月 | 政治  面貌 | 学历  学位 | 工 作 单 位 | 职 务  职 称 | 联系电话 |
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（此表可复印）