附件3

广东省突发事件应急管理专家推荐汇总表

推荐单位：（盖章） 年 月 日

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| 姓 名 | 工 作 单 位 | 职 务 | 职 称 | 发证日期 | 从事专业 | 工作电话 | 住宅电话 | 移动电话 | 电子邮箱 |
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