**滇西大傣医药学院公务接待审批单**

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| **部 门** | **接待单位** | | **人 数** | | **时 间** | | **地 点** |
|  |  | |  | |  | |  |
| **事 由** |  | | | | | | |
| **接待**  **人员**  **名单** | **姓 名** | **职 务** | | **姓 名** | | **职 务** | |
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| **陪同人员** |  | | | | | | |
| **办公室**  **意见** | **年 月 日** | | | | | | |
| **学院领**  **导意见** | **年 月 日** | | | | | | |