2020年代理从业人员考试报名表

**代理公司名称：**

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| **序号** | **姓名** | **身份证号码** | **联系电话** | **人员类型** |
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| 注：人员类型填写“项目组负责人”或“项目组成员”。 | | | | |

**联系人： 联系电话：**