**南京中医药学会专业委员会委员候选人推荐汇总表**

推荐单位（公章）： 推荐时间： 年 月 日

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| **拟推荐委员会名称** | **序号** | **姓名** | **出生年月** | **职务** | **职称** | **联系电话** |
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