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| 2018年度江苏省中医药局科技项目申报汇总表 | | | | | |
| 单位（盖章）：\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 填表人：\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 联系电话：\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | |
| 序号 | 项目名称 | 申请人 | 申请人所在单位 | 所属学科 | 项目类型 |
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| （备注：此汇总表由市卫生计生委和直报单位填写） | | | | |  |