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| 附件3  河南省院校类职业技能等级认定机构汇总表   填报人： 联系电话： 填表日期： | | | | | | | | | |
| 序号 | 企业名称 | 机构码（备案号） | 负责人 | 联系电话 | 联系人 | 联系电话 | 地址 | 邮箱 | 备注 |
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