**人员配置表**

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| 序号 | 本项目拟  担任职务 | 姓名 | 性别 | 年龄 | 学历 | 职称/资格 | 工作年限 | 备注 |
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**注：应附相关人员身份证、毕业证、职称证(若有)、资格证书等相关证件复印件加盖单位公章。**

供应商： （公章）

法定代表人或授权代表： (签字或盖章)

日 期： 年 月 日