附件4

**参加回执**

填报单位：

|  |  |  |  |
| --- | --- | --- | --- |
| **姓名** | **职务** | **联系电话** | **备注(车牌)** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

填报人： 联系电话：