附件2

参 赛 回 执

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| 市（县）科协： | | | | |
| 序号 | 姓 名 | 性别 | 所在单位 | 参赛项目名称 |
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| 注：请各市、直管县科协于4月23日前将参赛名单（限领队和参赛选手）报送至宿州市科协，邮箱：szkxkpb@163.com | | | | |