附件一

**招标代理机构专职人员证领取登记表**

**单位名称（盖章）：**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **序号** | **姓名** | **上岗证号** | **职称** | **注册资格** | **备注** |
| 1 |  |  |  |  | 法人(在黔负责人) |
| 2 |  |  |  |  | 技术负责人 |
| 3 |  |  |  |  |   |
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| 12 |  |  |  |  |  |
| 13 |  |  |  |  |  |

填报人： 核验人：