附件4

妇幼保健机构能力提升建设等项目单位和项目指导单位联络员名单

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| 项目名称 | 项目单位/  指导单位 | 联络员信息 | | | | | |
| 姓名 | 性别 | 职务/职称 | 办公电话 | 手机 | 传真 |
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