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| 政府信息公开申请表   |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | | 申  请  人  信  息 | 公  民 | 姓名 | |  | | | | | | 联系电话 | |  | | 传真 |  | | | 电子邮箱 | |  | | 邮政编码 |  | | | 联系地址 | |  | | | | | | 法人/其他组织 | 名称 | |  | | | | | | 联系人姓名 | |  | | | | | | 联系人电话 | |  | 传真 | | |  | | 联系地址 | |  | | | | | | 电子邮箱 | |  | | | | | | 申 请 时 间 | | | 年  月  日 | | | | | | 所  需  信  息  情  况 | 所需信息的内容描述 | |  | | | | | | |  | 获取信息的方式（可选）  □邮寄  □电子邮件 □传真 □自行领取 | | | | | | | | |
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