附件1：绍兴市人民医院镜湖总院相关后勤服务市场调研信息登记表

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| 序号 | 报名单位名称 | 报名调研内容 | 制作调研方案所需甲方提供的信息及配合的内容 | 从获取信息后调研方案制作所需时间 | 联系人及联系方式 |
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