附件：

第八届慈展会采访申请回执表

**填表单位（盖章）： 经办人： 联系电话：**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **序号** | **新闻单位** | **记者姓名** | **联系电话**  **（手机）** | **身份证号** | **电子邮箱** | **记者类别**  **（文字、摄影、摄像）** | **记者证编号**  **（国家新闻出版部门核发）** |
| 1 |  |  |  |  |  |  |  |
| 2 |  |  |  |  |  |  |  |
| 3 |  |  |  |  |  |  |  |
| 4 |  |  |  |  |  |  |  |
| 5 |  |  |  |  |  |  |  |
| 6 |  |  |  |  |  |  |  |
| 7 |  |  |  |  |  |  |  |
| 8 |  |  |  |  |  |  |  |