附件二：

“党旗飘扬”武汉市卫生健康系统庆祝中国共产党百年华诞主题参展摄影书画作品报名表

选送单位: 联系人: 联系电话:

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| **序 号** | **创作时间** | **作品名称** | **所在分工会** | **所在科室** | **作者姓名** |
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