附件

推荐服务平台汇总表

**区级中小企业主管部门（盖章）：**

|  |  |  |  |  |  |  |
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| **序号** | **服务平台名称** | **试点行业名称** | **试点企业名称** | **实际改造成本** | **服务平台联系人** | **服务平台联系方式** |
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