**附件**

**2022年绍兴市基础**公益类研究计划项目**推荐汇总表**

推荐单位： （盖章） 联系人： 联系电话：

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| **序号** | **项目名称** | **项目类别** | **申报单位** | **项目负责人** | **评审领域** | **项目总经费（万元）** | **备注** |
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