附件1

**报名回执表**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 培训班 | **自然人税收管理高级研修班（计划外）** | | | | |
| 单 位 |  | | | 地区 |  |
| 姓名 | 性别 | 职务 | 身份证号 | 手机号 | |
|  |  |  |  |  | |
|  |  |  |  |  | |
|  |  |  |  |  | |
| 备注 |  | | | | |