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| 对外经济贸易大学校内电话撤销功能申请表 | | | | | | |
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| 申请单位（学院 / 部门）： | | | | | | |
| 联系人： | | | 联系电话（手机）： | | | |
| 序号 | 电话号码 | 呼叫转移功能 | 来电显示功能 | | 长途 | |
| 国内 | 国际 |
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| 说明：请在需撤销的功能处打“×” | | | | | | |
| 备注：请将申请表由部门负责人签字盖章后送至计算机中心楼配楼2层，联系电话6449 2211。 | | | | | | |
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|  |  | **申请单位签章：** | | |  |  |
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|  |  |  | **年 月 日** | | | |