**附件3：**

#### 会员单位联络员信息登记表

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| 单位名称 |  | | | | | | | | | | |
| 协会归口联络员 |  | 部门 |  | 职务 |  | 座机 |  | 手机 |  | 邮箱 |  |
| 相关业务对接联系人 | | | | | | | | | | | |
| 业务 | 姓名 | | 部门 | | 职务 | 座机 | | 手机 | | 邮箱 | |
| QC小组 |  | |  | |  |  | |  | |  | |
| 质量信得过班组 |  | |  | |  |  | |  | |  | |
| 卓越绩效管理 |  | |  | |  |  | |  | |  | |
| 质量创新 |  | |  | |  |  | |  | |  | |
| 现场管理 |  | |  | |  |  | |  | |  | |
| 用户满意度 |  | |  | |  |  | |  | |  | |
| 电力设备质量管理（按专业部门填写） |  | |  | |  |  | |  | |  | |
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| **单位签章：**  **年 月 日** | | | | | | | | | | | |