附件3： **2020年医师考试报名考生名单**

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| 序号 | 报名医疗机构 | 考生姓名 | 考生手机 | 复审结果 |
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送审单位：（公章） 送审人： 手机：

此表：各县区、市管医疗机构汇总上报，送审材料与名单顺序一致。