附件3：

**山东大学齐鲁医院2020年工会工作积极分子候选人统计表**

**基层工委**：

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **序 号** | **OA号** | **科 室** | **姓 名** | **电话（手机）** | **备注** |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |