附件3

**承接电动自行车以旧换新直营门店表**

**参与主体名称（加盖公章）：**

**参与类型：□销售主体 □回收主体**（符合两个类型可同时勾选）

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| 序号 | 直营门店名称 | 面积 | 详细地址 | 负责人 | 联系方式 |
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