附件2：

长沙市律师行业退役军人摸底表

填报单位（盖章）： 填报人： 联系电话：

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| 姓名 | 性别 | 律所名称 | 联系电话 | 退役、复原、转业证号 | 立功受奖情况 |
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备注：立功受奖情况根据本人情况如实填写，如填写请提供相关材料。