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| **会费缴纳回执** | | |
| **单位名称** | |  |
| **会员单位级别** | |  |
| **付款账号** | |  |
| **付款金额** | |  |
| **发票抬头** | **名 称** |  |
| **纳税人识别号** |  |
| **开户行及账号** |  |
| **地址、电话** |  |
| **证书邮寄地址及联络人姓名、电话** | |  |
| **联络人邮箱** | |  |