附件2

2021年江门市志愿服务项目大赛组织推荐

汇总表

填报单位（盖章）：

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **序号** | **项目名称** | **项目实施组织** | **领域类别** | **项目**  **负责人** | **联系电话** |
| 1 |  |  |  |  |  |
| 2 |  |  |  |  |  |
| 3 |  |  |  |  |  |
| 4 |  |  |  |  |  |
| 5 |  |  |  |  |  |
| 6 |  |  |  |  |  |
| 7 |  |  |  |  |  |
| 8 |  |  |  |  |  |
| 9 |  |  |  |  |  |
| 10 |  |  |  |  |  |
| 11 |  |  |  |  |  |
| 12 |  |  |  |  |  |
| 13 |  |  |  |  |  |

填表人： 联系电话：

**备注：按项目组织推荐的先后顺序排序。此表可复制。**