**附件1**

**办理进场交易证人员汇总表**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **单位名称**  **(加盖公章）** |  | | | | |
| **通讯地址** |  | | | | |
| **法定代表人** |  | | | **联系电话** |  |
| **业务联系人** |  | | **联系电话** | |  |
| **姓 名** | **性别** | **身份证号码** | **电子照片**  **（jpg格式）** | | **联系电话** |
|  |  |  |  | |  |
|  |  |  |  | |  |
|  |  |  |  | |  |
| **备 注** | **无** | | | | |

**特别提醒：到受理大厅现场验证时须携带本表（加盖公章）。**