**文件送印清单（考试专用）**

WYGG-WY/QR-08 学期： 送印部门： NO:

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| 序号 | 送印日期 | 任课教师 | 试卷名称 | 考试日期 | 原稿页数 | 份数 | 考场数 | 是否需白纸或答题卡 | 送印人签名 | 承印人签名 |
| 1 |  |  |  |  |  |  |  |  |  |  |
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| 20 |  |  |  |  |  |  |  |  |  |  |

记录： 审核：