附件1

**绍兴市广播电视政府奖参评作品目录**

**参评单位：**

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **编号** | **作品标题** | | | **体裁** | **时间**  **长度** | **参评**  **项目** | | | **作 者** |
| 1 |  | | |  |  |  | | |  |
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| 上述作品内容真实，相关申报材料属实。我单位同意推荐上述作品参评。  2019年 月 日（请在此加盖初评单位公章） | | | | | | | | | |
| **联系人** | |  | | **电话** |  | | **手机** |  | |
| **联系人地址** | | |  | | | | **邮编** |  | |