**生命与环境科学学院教师自购药品备案登记表**

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| **教师** |  | **存放地点** |  |
| **项目名称** |  | | |
| **药品名称** | **数量** | **用途** | |
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| **实验中心意见** | **签名：**  **年 月 日** | | |