附件

推荐汇总表

填报市州：

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| **序号** | **机构名称** | **服务收入（万元）** | **总资产****（万元）** | **服务小巨人企业数量（家）** | **专职人员（人）** | **专业条件** | **备注** |
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注：专业条件按照技术创新、数字化赋能、品牌能力提升、上市融资四类填写。