附件1：**体检递补人员名单**

|  |  |  |  |
| --- | --- | --- | --- |
| **序号** | **准考证号** | **岗位代码** | **备注** |
| 1 | 341202020430 | 1202010 |  |
| 2 | 341202021620 | 1202016 |  |
| 3 | 341202023224 | 1202025 |  |
| 4 | 341202025418 | 1202027 |  |