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| **八、各单位经费预算**（如果有协作单位，请填写此表） | | | | |
| **牵头单位** | **预算总经费**  **（万元）** | **2018年度经费** |  |  |
| **烟草研究所** | **2** | **0** |  |  |
| **协作单位** | **预算总经费**  **（万元）** | **2018年度经费** |  |  |
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