附件 3

石家庄市实验仪器行业协会团体标准征求意见表

团体标准名称：

接收反馈意见邮箱：

意见提出人单位和姓名：

联系方式：

|  |  |  |  |
| --- | --- | --- | --- |
| 序号 | 章条编号 | 意见内容 | 理由 |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |