# 征求意见反馈表

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| --- | --- | --- | --- | --- | --- |
| 填表单位 |  | | | | |
| 填表人 |  | 职务或职称 |  | 联系方式 |  |
| 意见分类 （请在意见类别上划“√”） | | 赞成 |  | 不赞成 |  |
| 序号 | 意见章条及原标准内容 | | 修改意见及依据 | | |
| 1 |  | |  | | |
| 2 |  | |  | | |
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| 11 |  | |  | | |
| 12 |  | |  | | |
| 填表单位（签章）  年 月 日 | | | | | |