**征求意见回复表**

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| --- | --- | --- | --- | --- | --- |
| 联系人 | |  | | | |
| 通讯地址 | |  | | | |
| 联系电话 | |  | | | |
| 邮 箱 | |  | | | |
| 序号 | 标准条款 | | 修改意见 | 主要理由 | 备注 |
|  |  | |  |  |  |
|  |  | |  |  |  |
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| …… |  | |  |  |  |

**单位盖章或专家签字：**